

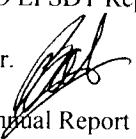


STATE OF TENNESSEE  
DEPARTMENT OF HEALTH  
BUREAU OF TENNCARE  
729 CHURCH STREET  
NASHVILLE, TENNESSEE 37247-6501

sent 2/22/99  
file  
EPSDT

MEMORANDUM

TO: MCO and BHO Executive Directors  
MCO and BHO EPSDT Representatives

FROM: Brian Lapps, Sr. 

SUBJECT: EPSDT Semiannual Report

DATE: February 17, 1999

Enclosed for your information is the EPSDT Semiannual Report which was filed with the court at the end of January. Please call Susie Baird at 615-741-0213 if you have questions or comments on this report.

BL/SB

**IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF TENNESSEE  
AT NASHVILLE**

JOHN B. CARRIE G., JOSHUA M., MEAGAN A. )	)	
and ERICA A., by their next friend, L.A.;	)	
DUSTIN P. by his next friend, Linda C.	)	
BAYLIS. by her next friend, C.W.;	)	
JAMES D. by his next friend, Susan H.;	)	
ELSIE H. by her next friend, Stacy Miller;	)	
JULIAN C. by his next friend, Shawn C.;	)	
TROY D. by his next friend, T.W.;	)	
RAY M. by his next friend, P.D.;	)	
ROSCOE W. by his next friend, K.B.;	)	
JACOB R. by his next friend, Kim R.;	)	
JUSTIN S. by his next friend, Diane P.;	)	
ESTEL W. by his next friend, E.D.;	)	
individually and on behalf of all others	)	
similarly situated,	)	
	)	
Plaintiffs,	)	
	)	
	)	NO. 3-98-0168
v.	)	Judge Nixon
	)	
NANCY MENKE, Commissioner,	)	
Tennessee Department of Health;	)	
THERESA CLARKE, Assistant Commissioner	)	
Bureau of TennCare; and	)	
GEORGE HATTAWAY, Commissioner	)	
Tennessee Department of Children's Services	)	
	)	
Defendants.	)	

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**JANUARY 1999 SEMI-ANNUAL PROGRESS REPORT**

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Pursuant to ¶ 104 of the Consent Decree entered on March 11, 1998, the state defendants agreed to file a semi-annual report with this Court and plaintiffs' counsel regarding their compliance with the terms of this order. Such reports are to be filed on July 31st and January 31st of each year.

Said reports “shall contain information, validated by the applicable audit and testing procedures outlined herein, which accurately and fully reflect the status of the state’s compliance with each of the applicable requirements of this order . . . .”

Attached to this notice is a copy of the Semi-Annual Progress Report for the period ending January 31, 1999. This Report contains the following components:

1. Overview of activities during report period
2. Attachment A: MCO and BHO EPSDT representatives
3. Attachment B: TennCare Handbook for Providers of Mental Retardation Services
4. Attachment C: A TennCare Handbook for Special Educators
5. Attachment D: Progress Report

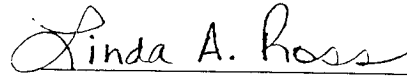
This document, in chart form, provides the ¶ number, topic, deadline and summary of progress regarding the particular elements.

6. Attachment E: Proposed Hearing and Vision Screening Guidelines
- 7 Attachment F: Statewide List of Services with which EPSDT Coordination is Appropriate
8. Attachment G: Information for Special Educators
9. Attachment H: DCS Provider Handbook
10. Attachment I: Semiannual Review of EPSDT Appeals

Pursuant to ¶ 104 of the Consent Decree, this semi-annual report is being provided to plaintiffs’ local counsel.

Respectfully submitted,


PAUL G. SUMMERS  
Attorney General and Reporter



LINDA A. ROSS  
Special Deputy for Litigation  
425 5th Avenue North  
Nashville, Tennessee 37243

**CERTIFICATE OF SERVICE**

I hereby certify that a true and exact copy of the foregoing document has been sent by U.S. Mail, first class, to Gordon Bonnyman and Michele Johnson, Tennessee Justice Center, 916 Stahlman Building, 211 Union Street, Nashville, Tennessee 37201 on this the 29<sup>th</sup> day of January, 1999.

  
LINDA A. ROSS

# **Semiannual Progress Report**

**EPSDT Consent Decree  
January 31, 1999**

# Table of Contents

Overview

Major Accomplishments During the Period

Attachments

- A. MCO and BHO EPSDT Representatives
- B. TennCare Handbook for Providers of Mental Retardation Services
- C. A TennCare Handbook for Special Educators
- D. Progress Report
- E. Proposed Hearing and Vision Screening Guidelines
- F. Statewide List of Services with which EPSDT Coordination is Appropriate
- G. Information for Special Educators
- H. DCS Provider Handbook
- I. Semiannual Review of EPSDT Appeals

## Overview

During this period the Bureau of TennCare established a new staff position to coordinate activities relating to children, including progress on EPSDT. Kasi Tiller, who has experience working with the Department of Health at both the State level and at the Memphis-Shelby County level, as well as experience working with children in State custody, was appointed to that position on December 21, 1998.

Several activities occurred during the past six months that were not specifically required by the EPSDT Consent Decree but which nevertheless will have an impact on the issues identified in the decree. These activities include the following:

- Completion of guidelines for mental health case management services for children and adolescents. A task force composed of advocates, providers, and State agency representatives compiled new recommendations for delivery of mental health case management services to children and adolescents. The guidelines identify factors that suggest that a child or adolescent may be in need of mental health case management services, and they also define levels and content of case management services. The guidelines will be incorporated into revisions of the contract between TennCare and the BHOs.
- Training for professionals serving children with Serious Emotional Disturbances (SED) and their families. Tennessee Voices for Children (TVC), a statewide agency advocating for improved services for children with emotional problems and their families, organized a training event to provide information to professionals, parents, and advocates on the principles and operation of a coordinated system of care. Dr. Cliff Davis, a consultant from Washington, D.C., led these workshops. Six training events were held, with 285 registered participants. This project was carried out under a grant to TVC from the federal Health Resources Services Administration (HRSA).
- Grant for outreach activities. The Robert Wood Johnson Foundation awarded a grant of \$991,648 to the Tennessee Health Care Campaign to support activities especially designed to increase enrollment of children in TennCare. Several urban and rural counties will serve as research sites for this project. Special emphasis will be placed on development of effective social marketing techniques to encourage families to enroll their children.
- Appointment of MCO/BHO EPSDT representatives. (See Attachment A.) Each MCO and BHO was asked to appoint an EPSDT representative to serve as a contact person for the organization. The representatives met for the first time on October 19, 1998, and discussed outreach strategies being used by each organization.
- Educational activities. A TennCare Handbook for Providers of Mental Retardation Services, which included significant information on EPSDT, was prepared and sent to the Division of Mental Retardation Services on October 1, 1998. (See Attachment

B.) A major section on EPSDT was included in this handbook. A TennCare Handbook for Special Educators was prepared for school officials and distributed on December 1, 1998, at a conference of the Tennessee Association of Administrators of Special Education. (See Attachment C.) This handbook outlined the requirements of EPSDT and procedures for using TennCare to assist children receiving special education services.

In the fall of 1998, ballots were mailed to all TennCare enrollees to offer them a chance to change their MCOs if they wished. Information about EPSDT was included with this ballot.

- Beginning of the development of a Special Needs Registry. Ann Duncan, Deputy Commissioner of the Department of Health, is spearheading a group to begin the development of a Special Needs Registry to identify and track children who are receiving services from more than one department so that service providers will be able to keep up with and better coordinate all services the child is receiving.

### **Major Accomplishments During the Period**

Attachment D contains an overall summary of the progress to date on each paragraph of the EPSDT Consent Decree. Listed below are highlights of this report from the past six months:

1. Development of guidelines for hearing and vision screening. (Paragraph 44)  
The EPSDT Screening Guidelines Committee has completed its proposed guidelines for vision and hearing screenings. (See Attachment E.) The committee, under the leadership of facilitator Dr. Joe McLaughlin, is now working on proposed guidelines for behavioral and developmental screenings and on plans for pilot testing all of the guidelines in at least one large pediatric practice in the State, as outlined in the Consent Decree.
2. Intensive review of TennCare provider agreements. (Paragraph 103)  
The TennCare Contract Development and Compliance section has reviewed 265 MCO, BHO, and DCS contracts that were previously reviewed by the Department of Commerce and Insurance in accordance with Paragraph 102. With the goal being to identify any contract issues which might potentially encourage violations of the EPSDT mandate, the CDCU found that 162, or 61%, of the contracts contained some language that might potentially encourage such violations. Each MCO and BHO was notified in writing of the findings of the review and given until September 25, 1998, to formulate a detailed corrective action plan for revising the deficient contracts. Nine of the 11 contractors completed the required corrective action plan within the specified time period. The two remaining contractors submitted either late or insufficient reports, and appropriate penalty actions have been taken to insure their subsequent compliance.

3. Completion of an expert review process. (Paragraphs 89-92)

DCS entered into a contract with Paul DeMuro to perform an expert review of TennCare services being delivered to children in State custody. The report was completed by Mr. DeMuro and his associates and submitted in September 1998. A number of problems were identified, most of which could be grouped as follows:

- Difficulty in accessing appropriate services, including comprehensive EPSDT screenings, for custody children;
- Difficulty in using the managed care model to obtain needed services for custody children;
- Insufficient services to prevent children from entering custody;
- Lack of improvement in custody children having specific diagnoses;
- Incomplete health information on custody children for DCS providers;
- Lack of effective non-residential services.

The report contained a number of recommendations for both DCS and the Department of Health.

4. Report on availability of TennCare services for children entering State custody. (Paragraph 73)

DCS contracted with the Center for Mental Health Policy at Vanderbilt University to conduct this study. Three reports were prepared which used existing data to generate conclusions about the availability of TennCare services for children entering State custody. The findings of this report were similar to those of the DeMuro report (see above).

5. Submission of a remedial plan to address problems in delivering health care to children in State custody. (Paragraph 92)

Discussions were held throughout the fall of 1998 among representatives of State agencies and the plaintiffs' attorneys about a remedial plan to address the problems found in the DeMuro report (see above). The State filed its remedial plan with the Court on December 11, 1998. The plan outlined the following proposed activities:

- Significant improvements in training of DCS workers to use TennCare effectively for their clients;
- Streamlining of the eligibility process for DCS children entering TennCare;
- Development of a streamlined complaint process for DCS workers who are having difficulty accessing TennCare services;
- Establishment of DCS Health Units in each region, to be composed of a nurse practitioner, a TennCare liaison, and a part-time clinical psychologist, for the purpose of identifying children's needs more accurately and accessing appropriate services more effectively;
- Identification of MCO and BHO liaison persons for DCS workers;
- Development of health passports for DCS children so that all who are involved with the child will know about any special health problems, medications, or chronic illnesses;

- Assurance that TennCare, upon request, will assign all foster children living with a set of foster parents to the same MCO;
- Establishment of a foster family focus group to provide insight to TennCare on problems and issues;
- Development of “best practices” for treating major diagnoses that DCS children are likely to have, starting with the following diagnoses: reactive attachment disorder, conduct disorder with an emphasis on sexual acting-out behavior; oppositional defiant disorder; and post-traumatic stress disorder following sexual abuse;
- Identification of DCS children who require mental health case management services in addition to DCS case management and provision of the service as medically necessary;
- Development of a crisis response capacity at DCS for providing services directly to children who have pressing behavioral health needs but do not require inpatient hospitalization;
- Organization of a Quality Improvement conference with a children’s track for providers, enrollees, and advocates.

6. Rules and policies. *(Paragraphs 39 and 72)*

A TennCare rule which removed limits other than medical necessity on behavioral health services to children became final on September 27, 1998. A second rule was prepared which outlined the various EPSDT outreach responsibilities of TennCare and its contractors. This rule was adopted as a public necessity rule effective December 22, 1998, and presented at hearing for permanent rule status on December 16, 1998.

Several TennCare Standard Operating Procedures (TSOPs) are in various stages of development. These TSOPs deal with EPSDT issues and will be communicated to all MCOs and BHOs.

7. Coordination with other agencies. *(Paragraphs 79-81)*

The Commissioner’s EPSDT Task Force was organized and held its first meeting on September 16, 1998. A staff committee has met twice and is in the process of beginning to develop interagency agreements and dispute resolution processes. Specific activity is underway around the development of an interagency agreement between TennCare and the Department of Education for children served under Part B and Part C of the Individuals with Disabilities Education Act (IDEA).

A list of statewide services with which EPSDT coordination is appropriate was prepared by TennCare and sent to the MCOs on September 22, 1998. (See Attachment F.)

A process for school personnel to use in informing MCOs about children having Individualized Education Plans (IEPs) was prepared by TennCare and sent to the MCOs on September 11, 1998. All Special Education Coordinators in the State

of Tennessee were notified about sharing IEP information with primary care providers (PCPs) on September 11, 1998, and a release form that schools could use in getting permission from parents to contact their children's PCPs was prepared by TennCare and sent to all Special Education Coordinations on September 30, 1998. (See Attachment G.)

8. DCS provider handbook. (Paragraph 60)

DCS has prepared a provider handbook for its providers and is in the process of getting this handbook printed and ready for distribution. (See Attachment H.)

9. Review of appeals. (Paragraph 101)

Several individual cases indicating specific contract violations were sent to TennCare by the Appeals Unit for action during this period. The Appeals Unit is responsible for making recommendations to the Bureau of TennCare for assessment of liquidated damages when there is documentation of patterns where EPSDT services have been inappropriately denied to children.

The total number of appeals filed on behalf of children during this period was very small. Between the months of July and December 1998, 360 appeals were recorded by the Tennessee Department of Health's Appeals Unit. There were approximately 525,000 children under age 21 who were enrolled in TennCare during this time, so the rate of appeals was less than 7 for every 10,000 children in the program.

Of the total number of appeals, about two in three (239) either ended or were resolved at the MCO/BHO level without ever reaching the Appeals Unit. The MCO/BHO reversed its earlier denial of service in 184 of these cases, and 53 cases were concluded with an informal resolution by agreement. Two appeals were withdrawn at the MCO/BHO level by the enrollee.

One hundred twenty-one appeals were either affirmed or not reconsidered by the MCO/BHO and therefore were sent to the Appeals Unit for resolution. In 62 of these cases, the Appeals Unit overturned the decision of the MCO/BHO. In 25 of these cases, the Appeals Unit upheld the decision of the MCO/BHO. In 11 cases, the appeal was concluded with an informal resolution by agreement. Three cases were withdrawn by the enrollee at this level, and 20 cases are still pending a decision.

The largest number of appeals were in the following areas: residential treatment (72), pharmacy (58), dental (39), mental health outpatient (33), and durable medical equipment (32).

The charts in Attachment I provide additional detail on these findings.

10. Review of MCO and BHO referral procedures. (Paragraph 53)

The EQRO reviewed the MCO and BHO procedures for making referrals and specified areas where improvement was needed. Requests for corrective action were made by the TennCare Quality Improvement Unit, and plans for corrective action have been submitted by the MCOs and BHOs.

## **Attachment A**

# **MCO and BHO EPSDT Representatives**

## **EPSDT Contact People at the MCOs and BHOs**

Access MedPlus	Andrea Thaler 615-255-2700 (ext. 1290)
Blue Cross	Lelis Welch 423-752-7906
John Deere	Joanna Richards 423-769-1536
OmniCare	Joyce Morgan 901-348-3350
Phoenix	Marsha Groce 615-463-1541
PHP TennCare	Mary Cogar 423-670-7338
Premier/TBH	Melissa Isbell 615-743-2115
Prudential	Jamie Patterson (interim) 901-259-9219
TLC	Cheryl Henderson 901-725-7100 (ext. 3101)
Vanderbilt	Rich Mauriello 615-782-7950

## **Attachment B**

# **TennCare Handbook for Providers of Mental Retardation Services**

# **A Guide to TennCare for Providers of Mental Retardation Services in Tennessee**

Bureau of TennCare  
October 1998

# **Table of Contents**

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**Table 2: Services Covered by the TennCare HCBS Waiver for Persons with Mental Retardation**

**Table 3: Scope of Covered Benefits Under EPSDT**

**Attachment C: Useful Telephone Numbers**

**Attachment D: Glossary**

# Introduction

This document is intended as a guide to TennCare and the resources it offers for persons with mental retardation. The guide has been developed specifically for providers of mental retardation services in order to help them have a better understanding of how TennCare works and how they can get appropriate services for their clients through TennCare.

We expect that this document will be updated frequently as new questions arise and as policies evolve. If you have questions you would like to see addressed in future editions, please direct those questions to Susie Baird, Director of Programs, or Dr. Michael Myszka, Psychologist, at the Bureau of TennCare, 749 Church Street, Nashville, Tennessee 37247-6501. You can also reach us by telephone at (615) 741-0213.

# Questions and Answers About TennCare

## **1. What is TennCare?**

TennCare is a health insurance program for people who are eligible for Medicaid or who are Uninsurable. There are certain groups of Uninsured people (people losing Medicaid coverage who do not have access to other insurance, children under age 19, and dislocated workers) who can also enroll in TennCare.

## **2. Can people be eligible for TennCare and have other insurance?**

People who are eligible for Medicaid can have other insurance and still be TennCare-eligible. People who are eligible as Uninsureds by definition have no other insurance. Most people who are enrolled as Uninsurables also have no other insurance, but some Uninsurables are people who have insurance that does not cover pre-existing conditions and similar circumstances.

If you are providing a service that is covered both by TennCare and by your client's private insurance, the private insurance should be billed first.

## **3. Does it cost anything for people to have TennCare?**

There are no cost-sharing obligations for people who are eligible for TennCare through the Medicaid category. Many people with mental retardation are eligible for Supplemental Security Income (SSI), which is a Medicaid category. Therefore, people on SSI do not have any TennCare cost-sharing responsibilities.

People who are eligible as Uninsureds or Uninsurables and whose family incomes are greater than TennCare's 100% of poverty standard must pay premiums to the State for their TennCare. These people also have deductibles and co-payments on all services other than preventive services.

## **4. Are people with mental retardation eligible for TennCare?**

Yes, if they meet the criteria for one of the TennCare eligibility categories. Many people with mental retardation are eligible for SSI, which means that they are automatically eligible for TennCare. Other people who are not eligible for SSI may be TennCare eligible if they meet the criteria for one of the other Medicaid eligibility categories or they are determined to be Uninsurable. Uninsurables are people who do not have health insurance and who have been turned down by an insurance company because of a medical reason or condition.

***To apply for SSI: Contact the Social Security Administration.***

***To apply for Medicaid:*** Contact the county office of the Department of Human Services.

***To apply for TennCare as an Uninsurable:*** Fill out the TennCare application form, get a letter from an insurance company turning the individual down because of a health reason, and send these two items to the TennCare Bureau, P. O. Box 740, Nashville, TN 37202-0740.

***To apply for TennCare as an Uninsured:*** Children under age 19 who do not have access to health insurance can apply for TennCare as Uninsureds through their local health departments. Individuals who are losing Medicaid eligibility and who do not have access to other health insurance can apply directly to TennCare as Uninsureds, as long as they apply within 30 days of losing their Medicaid eligibility. The TennCare application form should be filled out and sent to the TennCare Bureau, P. O. Box 740, Nashville, TN 37202-0740.

**NOTE:** When helping a client fill out a TennCare application, make sure that the application is filled out completely. Applications which arrive at TennCare with missing or incomplete information may be denied.

#### **5. How do I know if a particular individual is already on TennCare?**

Providers can call the **TennCare Information Line** at 1-800-669-1851 (741-4800 in the Nashville area). They need to know the person's correct name, his or her Social Security Number, and his or her date of birth in order for the TennCare Information Line staff to be able to positively identify the individual.

#### **6. Where can I go to get TennCare applications and information about TennCare?**

TennCare applications are available at local health departments. You can also get them by calling the **TennCare Information Line** at 1-800-669-1851 (741-4800 in the Nashville area). People with **hearing impairments** can call the **TTY line** at 1-800-772-7647 (313-9240 in the Nashville area). There is also a **Spanish-speaking information line** at 1-800-254-7568 (227-7568 in the Nashville area).

A good source of general information about TennCare is the TennCare website, which is located at [www.state.tn.us/health/tenncare](http://www.state.tn.us/health/tenncare). The website contains a wealth of information about TennCare policies and is updated on a regular basis.

#### **7. What are "Managed Care Organizations" and "Behavioral Health Organizations," and how do TennCare enrollees enroll in them?**

Most TennCare services are delivered through two types of **managed care entities**: an **MCO** (Managed Care Organization) for physical health care and a **BHO** (Behavioral Health Organization) for mental health and substance abuse care. Every person in

TennCare belongs to *both* an MCO and a BHO. There are 9 MCOs and 2 BHOs. A list of the addresses and phone numbers of these organizations is included in Attachment A.

***Current MCOs are as follows:***

- Access. . . MedPlus (statewide)
- Blue Care (statewide)
- John Deere Health Plan (East Tennessee only)
- OmniCare Health Plan (Shelby and Davidson Counties only)
- Phoenix Health Plan (statewide)
- Preferred Health Partnership (statewide until January 1, 1999, when it will be available only in East Tennessee)
- Prudential Community Care (Shelby County only)
- TLC Family Care Healthplan (Shelby County, Northwest and Southwest Regions)
- VHP Community Care (Davidson County only)

***Current BHOs are as follows:***

- Tennessee Behavioral Health (statewide)
- Premier Behavioral Systems (statewide)

Each MCO is “partnered” with a BHO, which means that people who are enrolled in a particular MCO are automatically enrolled in that MCO’s “partner” BHO. The following MCOs are “partnered” with **Premier**:

- Blue Care (except in the East Tennessee Community Service Area and Knox County)
- John Deere
- OmniCare
- Phoenix
- VHP Community Care

The following MCOs are “partnered” with **TBH**:

- Access. . . MedPlus
- Blue Care in the East Tennessee CSA and Knox County
- Preferred Health Partnership
- Prudential Community Care
- TLC Family Care Healthplan

*(The East Tennessee CSA includes the following counties: Anderson, Blount, Campbell, Claiborne, Cocke, Grainger, Hamblen, Jefferson, Loudon, Monroe, Morgan, Roane, Scott, Sevier, and Union.)*

EXAMPLE 1: Marcus Jones lives in Shelby County and has chosen TLC as his MCO. Mr. Jones’s BHO will be TBH, since that is the BHO which is partnered with TLC.

When people initially enroll in TennCare, they choose an MCO from among those which serve the area in which they live. (If they do not choose an MCO, they are assigned to

one.) They are enrolled in the BHO which is partnered with the MCO they have chosen (see above). Enrollees have a period of 45 days after enrollment when they can change MCOs if they wish, and thereafter they can change only once a year during the annual fall “Change Period.”

At the time of the fall “Change Period,” every TennCare enrollee is sent a ballot with the names of the MCOs available where he or she lives. If the enrollee wishes to change MCOs, he must return this ballot to TennCare with his new choice marked. The ballot must be returned within the timeframe indicated.

There are some circumstances in which people might change MCOs at a time other than the annual “Change Period.” People who are enrolled in one of the MCOs which is not a statewide MCO will need to change MCOs if they move to a geographic area that is not served by their MCO.

EXAMPLE 2: Marcus Jones (see Example 1) is planning to move from Memphis to Clarksville. Since Mr. Jones’s current MCO, which is TLC, only serves residents of West Tennessee, he must choose a new MCO from among those that serve Clarksville: Access. . MedPlus, BlueCare, and Phoenix. If he wants to remain with TBH as his BHO, he should select Access. . .MedPlus or BlueCare as his MCO. If he chooses Phoenix as his MCO, his BHO will change to Premier.

### **8. How do providers enroll in an MCO or BHO?**

Providers should contact the individual MCOs or BHOs which serve the areas in which they practice. MCOs and BHOs are required by the State to have adequate provider networks, meaning (a) that they have enough qualified providers to deliver all covered services to their enrollees and (b) that these providers are geographically accessible to their enrollees. As long as they have adequate provider networks, MCOs and BHOs are allowed to establish higher standards for providers than was the case in the Medicaid program. They can also enroll provider types (such as psychologists) who were not allowed to enroll as independent providers in the Medicaid program that preceded TennCare. Neither the MCOs nor the BHOs are required to enroll every provider who wishes to participate.

### **9. How does a person decide which MCO to pick?**

Enrollees must choose from among those MCOs which serve the area in which they live. A person who lives in Cookeville, for example, cannot choose VHP Community Care, since that MCO is only available to residents of Davidson County.

Many people choose MCOs on the basis of the doctors they usually go to for care. They ask these doctors which MCO(s) they are enrolled in, and they choose an MCO which includes their doctor.

**10. How can I find out which MCO or BHO my clients are enrolled in?**

TennCare enrollees have member identification cards from both their MCOs and BHOs. These cards provide the name of the MCO/BHO, information about how to reach them, information about what to do in an emergency, etc. For those enrollees who have cost-sharing obligations, the percentage of this obligation (2%, 4%, 6%, 8%, or 10%) is shown on the card. You can also find out MCO/BHO affiliations by calling the TennCare Information Line. Please refer to the response to Question 5 for instructions on how to do this.

**11. What services are available through TennCare?**

Table 1 in Attachment B illustrates the services that are covered by the TennCare MCOs and BHOs. TennCare also covers long-term care, meaning services in a Nursing Facility or an Intermediate Care Facility for the Mentally Retarded (ICF/MR). These services are covered outside the MCOs and BHOs. Other services covered by TennCare outside the MCOs and BHOs are Medicare cost-sharing and Home and Community Based Waiver Services.

**Medicare cost-sharing** means Medicare premiums, deductibles, and co-payments for certain Medicaid-eligible enrollees who are also Medicare beneficiaries, as well as for some low-income Medicare beneficiaries who are not Medicaid-eligible. As stated earlier, many persons with mental retardation will be eligible for SSI. TennCare pays the Medicare premiums and cost-sharing obligations for these people, as well as paying for services covered up to the Medicare deductible.

**Home and community based waiver services** are services delivered under the TennCare HCBS waiver, which is a separate waiver from the TennCare managed care waiver. Tennessee has three HCBS waiver programs, two for elderly and/or disabled people, and one large waiver for persons with mental retardation. Services covered by the HCBS waiver for persons with mental retardation are shown in Table 2 in Attachment B. These services are *in addition to* services covered by the TennCare MCOs and BHOs. They are delivered outside the MCOs and BHOs by service providers under contract to the Division of Mental Retardation Services. Where there are similarities between HCBS waiver services and MCO/BHO covered services, Table 2 includes an explanation of which entity is responsible.

**12. How do I go about getting services from TennCare for a person with mental retardation?**

All TennCare services, except for EPSDT screenings (see below) must be **medically necessary**. The TennCare definition of “medically necessary” is as follows:

*Medical assistance services or supplies provided by an institution, physician, or other provider that are required to identify or treat a TennCare enrollee’s illness, disease, or injury and which are:*

- a. *Consistent with the symptoms or diagnosis and treatment of the enrollee's illness, disease, or injury, and*
- b. *Appropriate with regard to standards of good medical practice; and*
- c. *Not solely for the convenience of an enrollee, physician, institution, or other provider; and*
- d. *The most appropriate supply or level of services which can safely be provided to the enrollee. When applied to the care of an inpatient, it further means that services for an enrollee's medical symptoms or condition require that the services cannot be safely provided to the enrollee as an outpatient; and*
- e. *When applied to enrollees under 21 years of age, services shall be provided in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Reconciliation Act of 1989.*

Except in the event of emergencies, a basic premise of the TennCare program is to **start with the primary care provider**. Every TennCare enrollee has a primary care provider through his or her MCO. Sometimes the PCP's name is on the enrollee's MCO card. If it is not, you can find out who the PCP is by contacting the MCO at the telephone number shown on the card.

Make an appointment for a check-up with the individual's PCP. That person can then be a source of referral for other services, such as specialists' services. Keep in mind that in order for the MCO or BHO to pay for a service, it must be "medically necessary."

EXAMPLE 3: Your program, ABC Developmental Services, requires developmental assessments for all the clients you admit. Betsy Ellis has applied for admission to your program. Betsy's primary care provider is Dr. Brown. Dr. Brown may agree that it would be nice for Betsy to have a developmental assessment, but he can find no medical reason why such an assessment is necessary. *You should not expect that Dr. Brown will order a developmental assessment for Betsy or that the MCO will pay for such an assessment simply because ABC Developmental Services requires it in order to admit Betsy. A developmental assessment will be paid for by the MCO only when it is medically necessary for Betsy.*

### **13. What is "prior authorization," and why is it important?**

A number of MCO and BHO services require "prior authorization" in order for them to be paid for by the MCO or BHO. "Prior authorization" means that the provider must call the MCO or BHO and explain why a particular service is medically necessary for a

particular enrollee. MCOs and BHOs may agree that the service is medically necessary; however, they have the discretion to require that the service be delivered by a provider in their network, unless it is an emergency. If a medical professional prescribes a covered service which the MCO or BHO determines is not medically necessary, the enrollee may appeal the MCO's or BHO's decision. (See response to Question 21.)

**14. What should I do with a TennCare enrollee in the event of an emergency?**

In an emergency, you should take the individual to the nearest health care provider, regardless of whether or not that provider is a member of the enrollee's MCO or BHO network. *You should be aware that the State requires MCOs and BHOs to deliver emergency services without prior authorization and without requiring that the service be delivered by a network provider.* MCOs and BHOs usually ask that providers of emergency services let them know about the emergency situation within 24 hours after it has occurred. The State's definition of **emergency medical services** is as follows:

*A sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity that the absence of immediate medical attention could reasonably result in:*

- a. *Permanently placing an enrollee's health in jeopardy,*
- b. *Causing other serious medical consequences,*
- c. *Causing impairments to bodily functions, or*
- d. *Causing serious or permanent dysfunction of any body organ or part.*

**15. Can I get mental health crisis services for a resident in my program who is experiencing a psychiatric crisis?**

Yes. You can call a statewide toll-free number (1-800-809-9957), which will connect you to the provider of crisis services in your community.

**16. What is EPSDT, and how does it affect my clients?**

"EPSDT" stands for Early and Periodic Screening, Diagnosis, and Treatment. This is a very important program for children under the age of 21.

Every client you have who is TennCare-eligible and who is also under the age of 21 is eligible for EPSDT. These clients should get regular check-ups even if there is no apparent health problem. EPSDT screens should be provided by the MCOs at the following times:

***For infants and toddlers:***

At birth	4 months old	15 months old
2-4 days old	6 months old	18 months old
1 month old	9 months old	24 months old
2 months old	12 months old	

***For older children and adolescents:***

3 years old	11 years old	17 years old
4 years old	12 years old	18 years old
5 years old	13 years old	19 years old
6 years old	14 years old	20 years old
8 years old	15 years old	
10 years old	16 years old	

If you or someone who works with the child suspects a problem, you should go ahead and arrange for an EPSDT check-up even if it is not yet time for one. This referral is called an “interperiodic screen” and *must* be followed up on by the MCO. EPSDT screens, including “interperiodic screens,” do *not* have to be “medically necessary” in order to be covered by the MCO.

EXAMPLE 4: Mary Anderson, who is 12 years old, had an EPSDT screening six months ago. She is not due to have another one for another six months. A staff member in Mary’s group home notices on an outing to the park that Mary seems to be having trouble hearing. The staff member should refer Mary to her PCP for an *interperiodic screen* to find out if there is a problem that needs more attention. There is no need to wait until the next regularly scheduled *periodic screening*.

The individual in the MCO who does the EPSDT screens is generally the child’s primary care provider (PCP). If the child’s PCP does not do EPSDT check-ups, contact the child’s MCO and they will help you find an EPSDT provider.

Just as important as the screenings is the follow-up. Providers who perform EPSDT screens may identify ~~potential health, developmental, or behavioral problems~~. They are responsible for making referrals to other MCO and BHO providers to do further testing or to provide treatment, as appropriate. While there is no requirement that EPSDT periodic or interperiodic screenings be medically necessary, additional testing and treatment services must meet the medical necessity criteria outlined in the response to Question 12.

**17. What about children with mental retardation who are in State custody?**

The Department of Children’s Services (DCS) is responsible for children in State custody. A list of EPSDT services covered by the MCOs, BHOs, and DCS is provided in Table 3 in Attachment B.

**18. What mental health and substance abuse services are available under TennCare for people with mental retardation?**

Mental health and substance abuse services are delivered under the TennCare Partners Program, which is a “carve-out” of the TennCare program. Two BHOs have contracted with the State to deliver these services.

There are two levels of mental health and substance abuse benefits for TennCare enrollees. The basic level of benefits includes psychiatric inpatient facility and physician services, outpatient mental health services, limited alcohol and drug abuse benefits (see Table 1 in Attachment B), pharmacy and lab services, transportation, and crisis services. The enhanced level of benefits includes mental health case management, residential treatment, psychiatric housing services, unlimited alcohol and drug abuse benefits, specialized outpatient mental health services, and psychiatric rehabilitation services. These services are offered in addition to all the basic benefits.

The basic level of benefits is available to all TennCare enrollees, regardless of whether they happen to have other diagnoses such as mental retardation. The enhanced benefits are available, when medically necessary, for all children under age 21 and for those adults 21 and older who have been determined to be Severely and/or Persistently Mentally Ill, or “SPMI.”

You may hear two terms used in discussions of persons with serious mental illnesses and functional impairments. “SPMI” is the term used for individuals 18 years of age and older, while “SED” (Seriously Emotionally Disturbed) is the term used for children under the age of 18. SPMI and SED determinations are made by Community Mental Health Centers, Regional Mental Health Institutes, and Community Case Management Agencies, working under contract to the BHOs. If you have a client with mental retardation who you believe is also mentally ill, you can call the nearest CMHC or CMHA for an appointment to get a SPMI or SED rating. If you do not know where to call or you have trouble making the appointment, call the individual’s BHO for assistance.

Because of EPSDT (see response to Question 16), TennCare enrollees who are either SPMI or SED *and* who are under age 21 are eligible for any benefit covered by TennCare when this service is medically necessary. This means that an individual does not have to carry the SED or SPMI label in order to be eligible for enhanced services which have been determined to be medically necessary for him. For enrollees 21 years of age and older, medically necessary enhanced benefits are available only for persons labeled SPMI.

If you have questions about mental health or substance abuse benefits, you can call the enrollee’s BHO or the TennCare Partners Information Line at 1-800-758-1638 (242-7339 in the Nashville area).

**19. Is there someone who can help a client who is having trouble accessing TennCare services?**

Yes. There is a Consumer Advocacy Line which has been set up by TennCare for the express purpose of assisting individuals with multiple health problems and others who are having difficulty navigating the TennCare system. The number for the Consumer Advocacy Line is 1-800-722-7474 (313-9240 in the Nashville area). They will assign a caseworker to help the individual having difficulty or his representatives.

**20. What transportation services are available through TennCare for my clients?**

TennCare pays for transportation to covered services for those people who do not have an available source of transportation. The MCO pays for transportation to MCO-covered services, while the BHO pays for transportation to BHO-covered services. The Member Handbooks from the MCOs and BHOs outline the procedures for requesting transportation services.

**21. How do clients complain about TennCare or file an appeal?**

When a client or a client's representative has a concern about TennCare, the first step should be to talk to the provider and the MCO or BHO. If the situation cannot be resolved at that level, the client may file a *complaint* or an *appeal*. MCOs and BHOs have contact persons available to assist enrollees with complaints and appeals. You can call them directly or call the Tennessee Department of Health Appeals Unit at 1-800-560-5767 (532-6700 in the Nashville area).

A *complaint* refers to the enrollee's right to protest any action taken (or not taken, depending on the circumstances) by an MCO, BHO, or service provider *other than* the denial, reduction, termination, suspension, or delay of a medically necessary covered service. Complaints are made in writing to the MCO or BHO, and written decisions must be rendered by the MCO or BHO within 30 days of receipt.

An *appeal* refers to the enrollee's right to protest any action taken by the MCO or BHO which results in a denial, termination, suspension, reduction, or delay of a medically necessary covered service. MCOs and BHOs are required to issue a plain language written notice to the enrollee of any action they are taking to deny, terminate, suspend, reduce, or delay medical assistance. Notices of actions to terminate, suspend, or reduce ongoing services must be sent to the enrollee *before* the action occurs, except in certain circumstances when the MCO or BHO is required to send the notice to the enrollee *no later than* the date of action. Notices of action are generally precipitated by a medical professional's recommendation, so appeals of these proposed actions should be made when there is a recommendation by another medical professional that the enrollee needs the service which is being denied, terminated, suspended, reduced, or delayed.

Once an enrollee has received a written notice of denial, termination, suspension, reduction, or delay of medically necessary covered services, he or his representative has several options if he disagrees with the proposed course of action. These options are as follows:

- a. He may request a *reconsideration* from the MCO or BHO of the adverse action. The MCO or BHO must issue a reconsideration decision within 14 calendar days of the date on which they receive the request from the enrollee, unless the enrollee requests a longer time.
- b. He may *appeal* the adverse action to the MCO or BHO. The appeal must be made in writing within 30 days of the enrollee's receipt of the written notice. Reasonable accommodations will be made for persons with disabilities who require assistance with their appeal. These accommodations could include such things as an appeal in person, by telephone, or by TTY services or other communication device for people with disabilities. The appeal must be resolved in writing within 90 days from the date the appeal is received. *All* of the following events must occur within this 90 day period:
  - The MCO or BHO reviews the appeal and makes a decision;
  - If the issue is not resolved at the MCO/BHO level, TennCare reviews the appeal and makes a decision;
  - If the issue is not resolved by TennCare, a hearing for the enrollee before an impartial hearing officer or administrative judge is arranged;
  - The impartial hearing officer or administrative judge renders a written decision.
- c. He may request an *expedited appeal* if the action proposed by the MCO or BHO will result in denying him urgent care. The enrollee or his representative AND his primary care provider or treating specialist physician must attest that the enrollee requires urgent care in order for his appeal to be expedited. Expedited appeals must be resolved within 31 days from the date the appeal is received. *All* of the following events must occur within the 31 day period:
  - The MCO or BHO reviews the appeal and makes a decision;
  - If the issue is not resolved at the MCO/BHO level, TennCare reviews the appeal and makes a decision;
  - If the issue is not resolved by TennCare, a hearing for the enrollee before an impartial hearing officer or administrative judge is arranged;
  - The impartial hearing officer or administrative judge renders a written decision.
- d. If the action proposed by the MCO or BHO will result in terminating, reducing, or suspending ongoing services, the enrollee or his

representative may appeal and request *continuation of services* during the appeal process. The request for continuation of services must be made within 10 days of the enrollee's receipt of notice from the MCO or BHO and before the service actually ends.

## **Attachment A**

### **TennCare MCOs and BHOs**

# MANAGED CARE ORGANIZATIONS

For Medical Services Only

Updated 09-22-98

<u>ADMINISTRATIVE OFFICES</u>		<u>PROVIDER SERVICES</u>	<u>MEMBER SERVICES</u>
<b>VOLUNTEER STATE HEALTH PLAN</b> <i>(BlueCare: Formerly BlueCross BlueShield of TN)</i> 801 Pine Street Chattanooga, Tennessee 37402-2555 ATT: Vicky Gregg, President and CEO (423) 752-6767 FAX: (423) 752-6790 <i>Serving: First Tennessee</i> <i>Southeast</i> <i>Upper Cumberland</i> <i>Mid Cumberland</i> <i>South Central Tennessee</i> <i>Northwest Tennessee</i> <i>Southwest Tennessee</i> <i>Davidson County</i> <i>Hamilton County</i> <i>Shelby County</i> <i>Knox County</i> <i>East Tennessee</i>	<i>First Tennessee</i>  <i>Southeast, Upper Cumberland, and Hamilton County</i>  <i>Mid Cumberland, South Central, and Davidson County</i>  <i>Northwest, Southwest and Shelby County</i>  <i>East Tennessee and Knox County</i>	1-800-468-9736  1-800-468-9786  1-800-818-0962  1-800-468-9772  1-800-468-9751	1-800-468-9693  1-800-468-9775  1-800-205-4983  1-800-468-9770  1-800-468-9771
<b>HERITAGE NATIONAL HEALTH PLAN OF TENNESSEE, INC.</b> <i>(John Deere Health Care/Heritage National Health Plan)</i> Executive Tower I 408 North Cedar Bluff Road, Suite 400 Knoxville, Tennessee 37923 ATT: Joanna Richards, TennCare Supervisor (423) 769-1536 FAX: (423) 690-1941 <i>Serving: First Tennessee</i> <i>Knox County</i> <i>East Tennessee</i> <i>Hamilton County</i> <i>Southeast Tennessee</i>		(423) 690-5572	1-800-778-1993
<b>MEMPHIS MANAGED CARE CORPORATION</b> <i>(TLC Family Care Healthplan)</i> P.O. Box 49 Memphis, TN. 38101 ATT: Karl V. Kovacs, Executive Director (901) 725-7100 FAX: (901) 725-3817; (901) 725-2844 <i>Serving: Shelby County</i> <i>Northwest</i> <i>Southwest</i>	<i>Shelby County</i>  <i>Northwest and Southwest</i>	(901) 725-7100 Ext. 3015  1-800-473-6523	(901) 725-7100  1-800-473-6523
<b>FOR FED-X PURPOSES:</b> 1407 Union Avenue, Suite 1100 Memphis, Tennessee 38104-3627			

**ADMINISTRATIVE OFFICES****PROVIDER  
SERVICES****MEMBER  
SERVICES****OMNICARE HEALTH PLAN, INC.***(OmniCare Health Plan)*

1991 Corporate Ave., 5th Floor

Memphis, Tennessee 38132

ATT: Osbie L. Howard, Executive Director

(901) 346-0064 FAX: (901) 348-2212

*Serving: Shelby County**Davidson County*

1-300-346-0034

1-800-876-9758

**PHOENIX HEALTH CARE OF TENNESSEE, INC.***(Phoenix Healthcare)*

3401 West End Avenue, Suite 470

Nashville, Tennessee 37203

ATT: Anica Howard, Executive Director

(615) 460-0262 FAX: 460-0288

*Serving: Statewide*

1-800-242-8840

1-800-449-3339

**PREFERRED HEALTH PARTNERSHIP OF TENNESSEE, INC.***[Preferred Health Partnership (PHP)]*

1420 Centerpoint Blvd.

Knoxville, Tennessee 37932

ATT: Ruth Allen, Vice President,

Government Programs

(423) 470-7470 FAX: (423) 470-7404

*Serving: Statewide*

1-800-747-0008

1-800-747-0008

**PRUDENTIAL HEALTH CARE PLAN, INC.***(Prudential Community Care)*

3150 Lenox Park Blvd., Suite 110

Memphis, Tennessee 38115

ATT: Michael Jones, Government Program Coordinator

(901) 541-9362 FAX: (901) 368-0643

*Serving: Shelby County*

1-800-778-5463

1-800-778-5463

**TENNESSEE MANAGED CARE NETWORK***(Access...MedPLUS)*

210 Athens Way

Nashville, Tennessee 37228

ATT: Anthony J. Cebrun, J.D., M.P.H., Chief Executive Officer

(615) 255-2700 FAX: (615) 313-2394

{205 Reidhurst - (615) 329-2016 FAX: (615) 313-2392}

*Serving: Statewide*

1-800-494-8068

1-800-523-3112

**VUMC CARE, INC.***(VHP Community Care)*

706 Church Street, Suite 500

Nashville, Tennessee 37203-3511

ATT: James Geraughty, M.D., Interim President

(615) 782-7821 FAX: (615) 782-7812

*Serving: Davidson County*

(615) 782-7878

(615) 782-7878

# BEHAVIORAL HEALTH ORGANIZATIONS

For Mental Health/Substance Abuse Services Only

Updated 09-22-98

## ADMINISTRATIVE OFFICES

## PROVIDER SERVICES

## MEMBER SERVICES

Premier Behavioral Systems of Tennessee  
222 Second Avenue North, Suite 220  
Nashville, Tennessee 37201  
ATT: Charles D. Klusener, Chief Manager  
(615) 313-4549 FAX: (615) 743-2131  
*Serving: Statewide*

1-800-325-7864

1-800-325-7864

Tennessee Behavioral Health, Inc.  
209 10th Avenue South, Suite 547  
Nashville, Tennessee 37203  
ATT: Charles D. Klusener, President  
(615) 313-4549 FAX: (615) 743-2131  
*Serving: Statewide*

1-800-447-7242

1-800-447-7242

## MCOs AND BHOs BY REGION

### FIRST TENNESSEE REGION

Carter, Greene, Hancock, Hawkins,  
Johnson, Sullivan, Unicoi, Washington

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9736	1-800-468-9698
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### EAST TENNESSEE REGION

Anderson, Blount, Campbell, Claiborne,  
Cocke, Grainger, Hamblen, Jefferson, Loudon,  
Monroe, Morgan, Roane, Scott, Sevier, Union

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9751	1-800-468-9771
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### SOUTHEAST REGION

Bledsoe, Bradley, Franklin, Grundy, Marion,  
McMinn, Meigs, Polk, Rhea, Sequatchie

#### MCO

#### Provider Services

#### Member Services

Access...MedPLUS

1-800-494-8068

1-800-523-3112

BlueCare

1-800-468-9786

1-800-468-9775

John Deere Health Care/Heritage National Health Plan

(423) 690-5572

1-800-778-1993

Phoenix Healthcare

1-800-242-8840

1-800-449-3339

Preferred Health Partnership (PHP)

1-800-747-0008

1-800-747-0008

#### BHO

Premier Behavioral Systems of Tennessee  
Tennessee Behavioral Health, Inc.

1-800-325-7864

1-800-325-7864

1-800-447-7242

1-800-447-7242

### UPPER CUMBERLAND REGION

Cannon, Clay, Cumberland, Dekalb, Fentress,  
Jackson, Macon, Overton, Pickett, Putnam,  
Smith, VanBuren, Warren, White

#### MCO

#### Provider Services

#### Member Services

Access...MedPLUS

1-800-494-8068

1-800-523-3112

BlueCare

1-800-468-9786

1-800-468-9775

Phoenix Healthcare

1-800-242-8840

1-800-449-3339

Preferred Health Partnership (PHP)

1-800-747-0008

1-800-747-0008

#### BHO

Premier Behavioral Systems of Tennessee  
Tennessee Behavioral Health, Inc.

1-800-325-7864

1-800-325-7864

1-800-447-7242

1-800-447-7242

### MID CUMBERLAND REGION

Cheatham, Dickson, Houston, Humphreys,  
Montgomery, Robertson, Rutherford, Stewart,  
Sumner, Trousdale, Williamson, Wilson

#### MCO

#### Provider Services

#### Member Services

Access...MedPLUS

1-800-494-8068

1-800-523-3112

BlueCare

1-800-818-0962

1-800-205-4983

Phoenix Healthcare

1-800-242-8840

1-800-449-3339

Preferred Health Partnership (PHP)

1-800-747-0008

1-800-747-0008

#### BHO

Premier Behavioral Systems of Tennessee  
Tennessee Behavioral Health, Inc.

1-800-325-7864

1-800-325-7864

1-800-447-7242

1-800-447-7242

### SOUTH CENTRAL TENNESSEE REGION

Bedford, Coffee, Giles, Hickman, Lawrence, Lewis,  
Lincoln, Marshall, Maury, Moore, Perry, Wayne

#### MCO

#### Provider Services

#### Member Services

Access...MedPLUS

1-800-494-8068

1-800-523-3112

BlueCare

1-800-818-0962

1-800-205-4983

Phoenix Healthcare

1-800-242-8840

1-800-449-3339

Preferred Health Partnership (PHP)

1-800-747-0008

1-800-747-0008

#### BHO

Premier Behavioral Systems of Tennessee  
Tennessee Behavioral Health, Inc.

1-800-325-7864

1-800-325-7864

1-800-447-7242

1-800-447-7242

## NORTHWEST TENNESSEE REGION

Benton, Carroll, Crockett, Dyer, Gibson,  
Henry, Lake, Obion, Weakley

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
TLC Family Care Healthplan	1-800-473-6523	1-800-473-6523
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## SOUTHWEST TENNESSEE REGION

Chester, Decatur, Fayette, Hardeman,  
Hardin, Haywood, Henderson, Lauderdale,  
Madison, McNairy, Tipton

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
TLC Family Care Healthplan	1-800-473-6523	1-800-473-6523
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**DAVIDSON COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-818-0962	1-800-205-4983
OmniCare Health Plan	1-800-346-0034	1-800-876-9758
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
VHP Community Care	(615) 782-7878	(615) 782-7878
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**HAMILTON COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9786	1-800-468-9775
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**KNOX COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9751	1-800-468-9771
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**SHELBY COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
OmniCare Health Plan	1-800-346-0034	1-800-876-9758
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
Prudential Community Care	1-800-778-5463	1-800-778-5463
TLC Family Care Healthplan	(901) 725-7100	(901) 725-7100 EXT. 3015
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## OUT - OF - STATE

MCO		Provider Services	Member Services
Access...MedPLUS		1-800-494-8068	1-800-523-3112
BlueCare	(Physician)	(423) 755-5992	1-800-836-6227
	(Hospital)	(423) 755-2043	
	(Other)	(423) 755-5973	
Phoenix Healthcare		1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)		1-800-747-0008	1-800-747-0008
BHO			
Premier Behavioral Systems of Tennessee		1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.		1-800-447-7242	1-800-447-7242

## **Attachment B**

### **TennCare Covered Services**

**TABLE 1**  
**MCO and BHO Covered Services**

Service	Covered by MCO	Covered by BHO	Comments
Inpatient hospital days	X		As medically necessary. Preadmission approval and concurrent reviews allowed.
Psychiatric inpatient facility services		X	As medically necessary for enrollees under 21 and over 65. For enrollees 21-65 who are not Severely and/or Persistently Mentally Ill (SPMI), limited to 30 days per occasion and 60 days per year.
24-hour psychiatric residential treatment		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Psychiatric housing/residential care		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Outpatient hospital days	X		As medically necessary.
Physician inpatient services	X		As medically necessary. This shall include acupuncture performed by a physician or a registered nurse as an anesthetic in connection with a surgical procedure.
Physician psychiatric inpatient services		X	As medically necessary.
Physician outpatient services	X		As medically necessary. This shall include acupuncture performed by a physician or a registered nurse as an anesthetic in connection with a surgical procedure.

Service	Covered by MCO	Covered by BHC	Comments
Outpatient mental health services		X	As medically necessary.
Specialized psychiatric outpatient and symptom management services		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Inpatient and outpatient substance abuse treatment services		X	As medically necessary for children under 21 and for enrollees 21 and older who are SPMI. For non-SPMI adults 21 and older, limited to 10 days detox; inpatient and outpatient substance abuse benefits for these enrollees have a maximum lifetime limitation of \$30,000.
Specialized psychiatric crisis services		X	As medically necessary.
Lab & X-ray services	X		As medically necessary.
Newborn services	X		As medically necessary including circumcisions performed by a physician.
Hospice care (must be provided by an organization certified pursuant to Medicare Hospice regulations)	X		As medically necessary.

Service	Covered by MCO	Covered by BHO	Comments
Dental services	X		Preventive, diagnostic, and treatment services for enrollees under age 21. Services for enrollees age 21 and older limited to cases of accidental injury to or neoplasms of the oral cavity, life threatening infection, accidental injury to natural teeth including their replacement (limited to the cost of bridgework of the replacement of teeth injured in an accident unless teeth implants are medically necessary) and the removal of impacted wisdom teeth. (The adult dental "accident" must be caused by some external force, like a car accident, not by some normal act of mastication, or grinding of teeth while sleeping, or any other naturally occurring circumstance.) Orthodontics limited to individuals under age 21 except when an orthodontic treatment plan is approved prior to the enrollee's attaining 20 ½ years of age, and treatment is initiated prior to the recipient attaining 21 years of age, or when orthodontic treatment is the result of facial hemiatrophy or congenital birth defects (if enrollee was covered by TennCare at birth).
Vision services	X		Preventive, diagnostic and treatment services (including eyeglasses) for enrollees under age 21. The first pair of cataract glasses or contact lens/lenses following cataract surgery is covered for adults.
Home health care	X		As medically necessary.
Pharmacy	X		As medically necessary. Non-covered therapeutic classes as described in TennCare contract. DESI, LTE, IRS drugs excluded.

Service	Covered by MCO	Covered by BHO	Comments
Psychiatric pharmacy services and pharmacy-related lab services		X	As of July 1, 1998, psychiatric pharmacy services are being provided directly by the State.
Durable medical equipment	X		As medically necessary.
Medical supplies	X		As medically necessary.
Emergency ambulance transportation	X	X	As medically necessary.
Non-emergency ambulance transportation	X	X	As medically necessary.
Non-emergency transportation	X	X	<p>As necessary for enrollees lacking accessible transportation for covered services.</p> <p>The travel to access primary care and dental services must meet the requirements of the waiver terms and conditions. The availability of specialty services, as related to travel distance, should meet the usual and customary standards for the community. However, in the event the MCO is unable to negotiate such an arrangement for an enrollee, transportation must be provided regardless of whether or not the enrollee has access to transportation. If the enrollee is a child, transportation must be provided for the child and an accompanying adult.</p>
Transportation to covered mental health and substance abuse services		X	<p>As medically necessary for enrollees lacking accessible transportation.</p> <p>The availability of specialty services, as related to travel distance, should meet the usual and customary standards for the community. However, in the event the BHO has no contracted provider for specialty services that meets the travel distance or other access</p>

Service	Covered by MCO	Covered by BHO	Comments
			requirements, transportation must be provided to an enrollee regardless of whether or not the enrollee has access to transportation. If the enrollee is a child and needs to be accompanied by an adult, transportation must be provided for both the child and the accompanying adult.
Community health services	X		As medically necessary.
Renal dialysis services	X		As medically necessary.
EPSDT services for enrollees under age 21 in accordance with federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.	X		Screening, diagnostic, and follow-up treatment services as medically necessary in accordance with federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989 for enrollees under 21. Screens shall be in accordance with the periodicity schedule set forth in the latest "American Academy of Pediatrics Recommendations for Preventive Pediatric Care" and all components of the screens must be consistent with the latest "American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care."

Service	Covered by MCO	Covered by BHO	Comments
Mental health case management		X	As medically necessary for children under 21. Must be offered to all persons with an assessment of CRG 1, CRG 2, or TPG 2. As clinically indicated for CRG 3.
Rehabilitation services	X		As medically necessary when determined cost effective by the MCO. All medically necessary services shall be provided to enrollees under 21 years of age in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.
Psychiatric rehabilitation services		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Chiropractic services	X		When determined cost effective by the MCO.
Private duty nursing	X		As medically necessary and when prescribed by an attending physician for treatment and services rendered by a registered nurse (R.N.) or a licensed practical nurse (L.P.N.), who is not an immediate relative.
Speech therapy	X		As medically necessary, by a Licensed Speech Therapist to restore speech (as long as there is continued medical progress) after a loss or impairment. The loss or impairment must not be caused by a mental, psychoneurotic, or personality disorder. All medically necessary services shall be provided to enrollees under 21 years of age in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.

Service	Covered by MCO	Covered by BHO	Comments
Sitter services	X		As medically necessary, a sitter who is not a relative may be used where an enrollee is confined to a hospital as a bed patient and certification is made by a network physician that R.N. or L.P.N. care is needed and neither is available.
Convalescent care	X		Upon receipt of proof that a covered person has incurred medically necessary expenses related to convalescent care, the Plan shall pay for up to and including the 100 <sup>th</sup> day of confinement during any calendar year for convalescent facility(ies) room, board, and general nursing care, provided: (1) a physician recommends confinement for convalescence; (2) the enrollee is under the continuous care of a physician during the period of confinement; and (3) the confinement is required for other than custodial care.
Donor organ procurement	X		As medically necessary for a covered organ transplant.

## Table 2

# Services Covered by the TennCare Home and Community Based Services Waiver for Persons with Mental Retardation

*NOTE: Most of the services covered by the HCBS waiver are not covered by TennCare. In cases where there may be some overlap, a differentiation is made between coverage of the service under the HCBS waiver and coverage under TennCare.*

Services Covered by the HCBS Waiver	Relationship to TennCare-Covered Services
Support coordination	Not covered by TennCare.
Home health aide services	As currently defined by the waiver, this service is the same as personal assistance (see below). TennCare covers medically necessary home health services. Personal assistance services are covered by the HCBS waiver.
Respite care	Not covered by TennCare.
Residential habilitation	Not covered by TennCare.
Day habilitation	Not covered by TennCare.
Supported employment	Not covered by TennCare.
Environmental accessibility adaptations	Durable medical equipment is provided by the MCOs. "Environmental accessibility adaptations" are necessary modifications of the home (widening doorways to accommodate wheelchairs, installing wheelchair ramps, modification of bathroom facilities), and are covered by the HCBS waiver.
Transportation	Transportation to MCO- and BHO-covered services is provided by the MCO and BHO. Transportation to waiver services, to community services or other activities specified in the individual's Plan of Care is provided by the HCBS waiver.
Specialized equipment and supplies and assistive technology	Durable medical equipment (including orthotics and prosthetics) and medical supplies, as well as augmentative communication devices, are the responsibility of the MCO; other items not normally covered by the MCO are covered by the HCBS waiver. Hearing aids and related audiological testing for children under 21 are covered by the MCO; hearing aids and related audiological testing for adults 21 and older are covered by the HCBS waiver.
Family training	Not covered by TennCare.
Community participation	Not covered by TennCare.
Family-based residential	Not covered by TennCare.

Services Covered by the HCBS Waiver	Relationship to TennCare-Covered Services
living	
Supported living	Not covered by TennCare.
Crisis intervention	Coverage of specialized psychiatric crisis services is the responsibility of the BHO. The HCBS waiver covers "crisis intervention services," which are defined as an intensive level of intervention and support (usually time limited) for individuals at times of behavioral, personal, or external crisis. This service may also include evaluation, training, and counseling for the individual, and training and consultation to families and service providers. Training and consultation means teaching and demonstrating the implementation strategies outlined in the Behavior Intervention Plan developed by a psychiatrist, psychologist, or Behavior Intervention Specialist.
Personal assistance	Not covered by TennCare.
Enhanced dental services	Medically necessary dental services for children under 21 are the responsibility of the MCO. There are limited dental services available for adults 21 and older through the MCO. Additional dental services for adults are covered by the HCBS waiver.
Nursing related services	The MCO is responsible when intermittent skilled nursing visits or private duty nursing are necessary for an enrollee who is homebound. The HCBS waiver is responsible for these services when the enrollee is not homebound.
Nutrition services	The MCO is responsible for covering nutrition services when there is a specific medical illness or condition (e.g., renal disease, diabetes mellitus), but not when the primary indication is based on the diagnosis of mental retardation, developmental disability, or related conditions. In these circumstances, the HCBS waiver is responsible.
Physical therapy	The MCO is responsible for medically necessary physical therapy related to acute conditions that have recently occurred. The HCBS waiver is responsible for other types of physical therapy, including routine evaluations and re-evaluations, provision of chronic care, and physical therapy for loss or impairment that occurred remotely in time.
Occupational therapy	The MCO is responsible for medically necessary occupational therapy for conditions resulting from acute illnesses that have recently occurred. The HCBS waiver is responsible for other types of occupational therapy, including routine evaluations and re-evaluations, provision of chronic care, and occupational therapy related to a condition that occurred remotely in time.

Services Covered by the HCBS Waiver	Relationship to TennCare-Covered Services
Speech, hearing, and language services	<ul style="list-style-type: none"> <li>• The MCO is responsible for coverage of speech therapy when loss or impairment of speech is due to an acute event that has recently occurred. The HCBS waiver is responsible for other types of speech therapy, including routine evaluations and re-evaluations, provision of chronic care, and speech therapy related to a condition that occurred remotely in time.</li> <li>• The MCO is responsible for the treatment of diseases or conditions of the ear requiring medical or surgical intervention. For children under 21, the MCO is also responsible for provision of hearing aids and related audiological testing, as well as routine evaluations and re-evaluations. For adults 21 and older, these services are provided by the HCBS waiver.</li> </ul>

# Table 3

## Scope of Covered Benefits Under EPSDT

Note 1: All services other than EPSDT screenings must be medically necessary.

Note 2: DCS "physical custody" means that DCS provides or arranges for the placement of the individual. Some children may be in DCS legal custody, but not physical custody. These are children who have been placed in DCS custody by the court but who live with parents or adoptive parents. TennCare-eligible children in DCS legal but not physical custody receive the same services from the BHOs that children who are not in custody receive.

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
1	Acute inpatient hospital services	X		
2	Psychiatric inpatient facility services		X	
3	Outpatient hospital services	X		
4	Outpatient mental health services		X	
5	Physician inpatient services	X		
6	Physician psychiatric inpatient services		X	
7	Physician outpatient services	X		
8	Inpatient and outpatient substance abuse treatment		X (as medically necessary)	X (for children in DCS)

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
	programs		except for enrollees who are children in DCS physical custody; for these children, the BHO is responsible for a maximum of 10 days detox and a maximum lifetime limitation of \$30,000 on inpatient and outpatient substance abuse treatment benefits)	physical custody, detox days in excess of 10 and inpatient and outpatient substance abuse treatment benefits in excess of the maximum lifetime limitation of \$30,000)
9	Lab & x-ray services	X (except for lab services related to psychotropic or substance abuse drugs)	X (lab services related to psychotropic or substance abuse drugs)	
10	Newborn services	X		
11	Hospice care	X		
12	Dental services	X		
13	Vision services	X		
14	Home health care For psychiatric home health care, see categories #4 and #32.	X		
15	Pharmacy	X (except for drugs related to mental health and substance abuse treatment)	X* (for mental health and substance abuse treatment)	
16	Durable medical equipment	X		

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
17	Medical supplies	X		
18	Emergency ambulance transportation	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
19	Non-emergency ambulance transportation	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
20	Non-emergency transportation to covered services	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
21	Community health services <i>For Community Mental Health Center services, see categories #4 and #32.</i>	X		
22	Renal dialysis services	X		
23	EPSDT screenings	X		
24	EPSDT diagnostic and treatment services	X (except for mental health and substance abuse problems)	X (for mental health and substance abuse problems)	
25	Developmental assessments	X (unless the child has a	X (if the child has a	

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
		previously diagnosed mental illness)	previously diagnosed mental illness)	
26	Rehabilitation services	X (except for psychiatric rehabilitation services)	X (psychiatric rehabilitation services for children not in DCS physical custody)	X (psychiatric rehabilitation services for children in DCS physical custody)
27	Chiropractic services	X (when determined cost effective by the MCO)		
28	Private duty nursing <i>For psychiatric private duty nursing services, see categories #4 and #32.</i>	X		
29	Speech therapy	X		
30	Case management	X	X (mental health case management for children not in DCS physical custody)	X (targeted case management for children in State custody or at risk of State custody; mental health case management when medically necessary for children in DCS physical custody)
31	24-hour residential treatment		X (for children not in DCS physical custody)	X (for children in DCS physical custody)
32	Specialized outpatient and symptom management		X (for children not in DCS physical custody)	X (for children in DCS physical custody)

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
	services			
33	Specialized crisis services		X <i>(for children not in DCS physical custody)</i>	X <i>(for children in DCS physical custody)</i>
34	Children's therapeutic intervention services			X <i>(for children in DCS physical or legal custody)</i>
35	Services in an intermediate care facility for the mentally retarded <i>(covered by TennCare outside the MCOs and BHOs)</i>			
36	Services in a nursing facility <i>(covered by TennCare outside the MCOs and BHOs)</i>			

*\*Effective July 1, 1998, pharmacy services for mental health and substance abuse drugs are managed and paid for by TennCare outside the BHOs.*

The "scope of benefits" provided in the EPSDT Consent Decree (see Section 54) includes the above services. The Consent Decree list is taken from federal statute, which is oriented more toward *types of service providers* than *types of services*. The list from the Consent Decree list is provided below, and services are cross-referenced to the services identified in the above chart.

- (a) Inpatient hospital services (other than services in an institution for mental diseases)—see #1.
- (b) Outpatient hospital services; rural health clinic services; and services offered by a federally qualified health center—see #3, #4, #8, #21.
- (c) Other laboratory and X-ray services—see #9.

- (d) EPSDT services, and family planning services and supplies—for EPSDT services, see all services listed in chart; for family planning services and supplies, see #5, #7, #17, #21.
- (e) Physicians' services; medical and surgical services furnished by a dentist—see #5, #6, #7, and #12.
- (f) Medical care, or any other type of remedial care recognized under state law, furnished by licensed practitioners within the scope of their practice as defined by state law—see all services listed in chart.
- (g) Home health care services—see #14.
- (h) Private duty nursing services—see #28.
- (i) Clinic services—see #3, #4, #8, #21, #26, and #32.
- (j) Dental services—see #12.
- (k) Physical therapy and related services—see #5, #7, and #21.
- (l) Prescribed drugs, dentures, and prosthetic devices; eyeglasses—see #13, #15, and #17.
- (m) Other diagnostic, screening, preventive, and rehabilitative services—see #23, #24, #25, #26.
- (n) Services in an intermediate care facility for the mentally retarded (other than in an institution for mental diseases)—see #35.
- (o) Inpatient psychiatric services for individuals under 21—see #2.
- (p) Services furnished by a nurse midwife—see #5, #7, and #21.
- (q) Hospice care—see #11.
- (r) Case management services and TB-related services—for case management services, see #30; for TB-related services, see #1, #3, #5, #7, #9, #15, #17, and #21.
- (s) Respiratory care services—see #14.
- (t) Services furnished by a certified pediatric nurse practitioner or certified family nurse practitioner—see #5, #7, #10.
- (u) Personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded, or institution for mental disease—see #24.
- (v) Any other medical care, and any type of remedial care recognized under state law, specified by the Secretary of the United States Department of Health and Human Services—see all services on above chart.

## **Attachment C**

### **Useful Telephone Numbers**

## Useful Telephone Numbers

TennCare Information Line

1-800-669-1851 (741-4800 in the Nashville area)

TennCare TYY Information Line for persons with hearing impairments

1-800-772-7647 (313-9240 in the Nashville area)

TennCare Spanish-speaking Information Line

1-800-254-7568 (227-7568 in the Nashville area)

TennCare Consumer Advocacy Line

1-800-722-7474 (313-9972 in the Nashville area)

TennCare Partners Mental Health and Substance Abuse Information Line

1-800-758-1638 (242-7339 in the Nashville area)

TennCare Partners Statewide Mental Health Crisis Line

1-800-809-9957

TennCare Appeals Unit

1-800-878-3192

(532-5764 in the Nashville area)

TennCare Bureau Office

615-741-0213

# **Attachment D**

## **Glossary**

# Glossary

<b>BHO</b>	Behavioral Health Organization <i>A TennCare organization that delivers mental health and substance abuse services.</i>
<b>CFR</b>	Code of Federal Regulations <i>Document containing federal regulations for programs such as Medicaid.</i>
<b>CRG</b>	Clinically Related Group <i>A category of individuals 18 and older who have serious mental health service needs.</i>
<b>DCS</b>	Department of Children's Services <i>The Department of State government that oversees the care of children in custody and at risk of custody.</i>
<b>DHS</b>	Department of Human Services <i>The Department of State government that performs Medicaid eligibility determinations.</i>
<b>EPSDT</b>	Early and Periodic Screening, Diagnosis, and Treatment <i>A federal program that requires a comprehensive array of screening, referral, and treatment services for Medicaid-eligible children under the age of 21.</i>
<b>HCBS</b>	Home and Community Based Services <i>A type of Medicaid waiver that offers home and community services to a special population who would otherwise be eligible for institutional placement.</i>
<b>HCFA</b>	Health Care Financing Administration <i>The federal agency that oversees the Medicaid and Medicare programs.</i>
<b>ICF/MR</b>	Intermediate Care Facility for the Mentally Retarded <i>The federal designation for certain residential facilities serving persons with mental retardation.</i>
<b>MCO</b>	Managed Care Organization <i>A TennCare organization that provides all health services except for mental health and substance abuse services and long-term care.</i>

<b>PCP</b>	<p>Primary Care Provider</p> <p><i>The individual in an enrollee's MCO who is responsible for coordinating his care.</i></p>
<b>SED</b>	<p>Seriously Emotionally Disturbed</p> <p><i>A term applied to children under age 18 who have serious mental illnesses and severe functional impairments.</i></p>
<b>SPMI</b>	<p>Severely and Persistently Mentally Ill</p> <p><i>A term applied to persons age 18 and older who have serious mental illnesses and severe functional impairments.</i></p>
<b>SSI</b>	<p>Supplemental Security Income</p> <p><i>A federal cash assistance program for eligible individuals.</i></p>
<b>TPG</b>	<p>Target Population Group</p> <p><i>A category of individuals under age 18 who have serious mental health service needs.</i></p>

## **Attachment C**

# **A TennCare Handbook for Special Educators**

# **EPSDT and TennCare: A Guide for Special Educators**

**Prepared for the Tennessee Association of  
Administrators of Special Education  
Conference in  
Gatlinburg, Tennessee**

**December 2, 1998**

**Susie Baird  
Bureau of TennCare**

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# Questions and Answers About TennCare

## Step One: Getting Children Enrolled

**Children must first be eligible for TennCare in order to be eligible for EPSDT services. TennCare does not pay for services for individuals who have not been determined eligible for the program.**

### ***1. What is TennCare?***

TennCare is a health insurance program for people who are eligible for Medicaid or who are Uninsurable. There are certain groups of Uninsured people (people losing Medicaid coverage who do not have access to other insurance, children under age 19, and dislocated workers) who can also enroll in TennCare. All TennCare enrollees must also meet basic eligibility criteria: they have a verified Social Security Number, they are United States citizens or legal resident aliens, they are residents of Tennessee, and they are not inmates of a correctional facility.

### ***2. Can people be eligible for TennCare and have other insurance?***

People who are eligible for Medicaid can have other insurance and still be TennCare-eligible. People who are eligible as Uninsureds by definition have no other insurance. Most people who are enrolled as Uninsurables also have no other insurance, but some Uninsurables are people who have Medicare or who have insurance that does not cover pre-existing conditions and similar circumstances.

### ***3. Does it cost anything for people to have TennCare?***

There are no cost-sharing obligations for people who are eligible for TennCare through one of the Medicaid categories. (There are over 40 different Medicaid categories, each with its own eligibility requirements.)

People who are eligible as Uninsureds or Uninsurables and whose family incomes are greater than TennCare's 100% of poverty standard must pay premiums to the State for their TennCare. These people also have deductibles and co-payments on all services other than preventive services.

### ***4. Are children with disabilities eligible for TennCare?***

Yes, if they meet the criteria for one of the TennCare eligibility categories. Some children with serious disabilities are eligible for SSI, which means that they are

automatically eligible for TennCare. Other children who are not eligible for SSI may be TennCare eligible if they meet the criteria for one of the other Medicaid eligibility categories or they are determined to be Uninsured or Uninsurable. Uninsureds are those who lack access to insurance through their parents' employers, and Uninsurables are those who do not have health insurance and who have been turned down by an insurance company because of a medical reason or condition.

*To apply for SSI: Contact the Social Security Administration.*

*To apply for Medicaid: Contact the county office of the Department of Human Services.*

*To apply for TennCare as an Uninsurable: Fill out the TennCare application form, get a letter from an insurance company turning the individual down because of a health reason, and send these two items to the TennCare Bureau, P. O. Box 740, Nashville, TN 37202-0740.*

*To apply for TennCare as an Uninsured: Children under age 19 who do not have access to health insurance can apply for TennCare as Uninsureds through their local health departments. Individuals who are losing Medicaid eligibility and who do not have access to other health insurance can apply directly to TennCare as Uninsureds, as long as they apply within 30 days of losing their Medicaid eligibility. The TennCare application form should be filled out and sent to the TennCare Bureau, P. O. Box 740, Nashville, TN 37202-0740.*

**NOTE:** When helping a client fill out a TennCare application, make sure that the application is filled out completely. Applications which arrive at TennCare with missing or incomplete information may be denied.

### **5. How do I know if a particular individual is already on TennCare?**

Providers can call the **TennCare Information Line** at 1-800-669-1851 (741-4800 in the Nashville area). They need to know the person's correct name, his or her Social Security Number, and his or her date of birth in order for the TennCare Information Line staff to be able to make a positive identification of the individual.

### **6. Where can I go to get TennCare applications and information about TennCare?**

TennCare applications are available at local health departments. You can also get them by calling the **TennCare Information Line** at 1-800-669-1851 (741-4800 in the Nashville area). People with **hearing impairments** can call the TTY line at 1-800-772-7647 (313-9240 in the Nashville area). There is also a **Spanish-speaking information line** at 1-800-254-7568 (227-7568 in the Nashville area).

A good source of general information about TennCare is the TennCare website, which is located at [www.state.tn.us/health/tenncare](http://www.state.tn.us/health/tenncare). The website contains a wealth of information about TennCare policies and is updated on a regular basis.

## Step Two: Working with the MCOs and BHOs

### **7. What are “Managed Care Organizations” and “Behavioral Health Organizations,” and how do TennCare enrollees enroll in them?**

Most TennCare services are delivered through two types of **managed care entities**: an **MCO** (Managed Care Organization) for physical health care and a **BHO** (Behavioral Health Organization) for mental health and substance abuse care. Every person in TennCare belongs to *both* an MCO and a BHO. There are 9 MCOs and 2 BHOs. A list of the addresses and phone numbers of these organizations is included in Attachment A.

#### ***Current MCOs are as follows:***

- Access. . . MedPlus (statewide)
- Blue Care (statewide)
- John Deere Health Plan (East Tennessee only)
- OmniCare Health Plan (Shelby and Davidson Counties only)
- Phoenix Health Plan (statewide)
- Preferred Health Partnership (statewide until January 1, 1999, when it will be available only in East Tennessee)
- Prudential Community Care (Shelby County only)
- TLC Family Care Healthplan (Shelby County, Northwest and Southwest Regions)
- VHP Community Care (Davidson County only)

#### ***Current BHOs are as follows:***

- Tennessee Behavioral Health (statewide)
- Premier Behavioral Systems (statewide)

Each MCO is “partnered” with a BHO, which means that people who are enrolled in a particular MCO are automatically enrolled in that MCO’s “partner” BHO. The following MCOs are “partnered” with **Premier**:

- Blue Care (except in the East Tennessee Community Service Area and Knox County)
- John Deere
- OmniCare
- Phoenix
- VHP Community Care

The following MCOs are “partnered” with **TBH**:

- Access. . . MedPlus

Blue Care in the East Tennessee CSA and Knox County  
Preferred Health Partnership  
Prudential Community Care  
TLC Family Care Healthplan

*(The East Tennessee CSA includes the following counties: Anderson, Blount, Campbell, Claiborne, Cocke, Grainger, Hamblen, Jefferson, Loudon, Monroe, Morgan, Roane, Scott, Sevier, and Union.)*

EXAMPLE 1: Marcus Jones lives in Shelby County and has chosen TLC as his MCO. Marcus's BHO will be TBH, since that is the BHO which is partnered with TLC.

When people initially enroll in TennCare, they choose an MCO from among those which serve the area in which they live. (If they do not choose an MCO, they are assigned to one.) They are enrolled in the BHO which is partnered with the MCO they have chosen (see above). Enrollees have a period of 45 days after enrollment when they can change MCOs if they wish, and thereafter they can change only once a year during the annual fall "Change Period."

At the time of the fall "Change Period," every TennCare enrollee is sent a ballot with the names of the MCOs available where he or she lives. If the enrollee wishes to change MCOs, he must return this ballot to TennCare with his new choice marked. The ballot must be returned within the timeframe indicated.

There are some circumstances in which people might change MCOs at a time other than the annual "Change Period." People who are enrolled in one of the MCOs which is not a statewide MCO will need to change MCOs if they move to a geographic area that is not served by their MCO.

EXAMPLE 2: Marcus Jones (see Example 1) is planning to move from Memphis to Clarksville. Since Marcus's current MCO, which is TLC, only serves residents of West Tennessee, he must choose a new MCO from among those that serve Clarksville: Access. . MedPlus, BlueCare, and Phoenix. If he wants to remain with TBH as his BHO, he should select Access. . MedPlus or BlueCare as his MCO. If he chooses Phoenix as his MCO, his BHO will change to Premier.

### **8. How do providers enroll in an MCO or BHO?**

Providers should contact the individual MCOs or BHOs which serve the areas in which they practice. MCOs and BHOs are required by the State to have adequate provider networks, meaning (a) that they have enough qualified providers to deliver all covered services to their enrollees and (b) that these providers are geographically accessible to their enrollees. As long as they have adequate provider networks, MCOs and BHOs are allowed to establish higher standards for providers than was the case in the Medicaid

program. They may also enroll provider types (such as psychologists) who were not allowed to enroll as independent providers in the Medicaid program that preceded TennCare. Neither the MCOs nor the BHOs are required to enroll every provider who wishes to participate.

*The procedure for enrolling school providers who are medical professionals is the same as the procedure for enrolling all other types of providers. Providers should contact the MCO or BHO and request to be enrolled as a provider.*

**9. How does a person decide which MCO to pick?**

Enrollees must choose from among those MCOs which serve the area in which they live. A person who lives in Cookeville, for example, cannot choose VHP Community Care, since that MCO is only available to residents of Davidson County.

Many people choose MCOs on the basis of the doctors they usually go to for care. They ask these doctors which MCO(s) they are enrolled in, and they choose an MCO which includes their doctor.

**10. How can I find out which MCO or BHO my students are enrolled in?**

TennCare enrollees have member identification cards from both their MCOs and BHOs. These cards provide the name of the MCO/BHO, information about how to reach them, information about what to do in an emergency, etc. For those enrollees who have cost-sharing obligations, the percentage of this obligation (2%, 4%, 6%, 8%, or 10%) is shown on the card. You can also find out MCO/BHO affiliations by calling the TennCare Information Line. Please refer to the response to Question 5 for instructions on how to do this.

<h2>Step Three: Getting Services Through TennCare</h2>
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**11. What services are available through TennCare?**

Table 1 in Attachment B illustrates the services that are covered by the TennCare MCOs and BHOs. TennCare also covers long-term care, meaning services in a Nursing Facility or an Intermediate Care Facility for the Mentally Retarded (ICF/MR). These services are covered outside the MCOs and BHOs. Other services covered by TennCare outside the MCOs and BHOs are Medicare cost-sharing and Home and Community Based Waiver Services.

**Medicare cost-sharing** means Medicare premiums, deductibles, and co-payments for certain Medicaid-eligible enrollees who are also Medicare beneficiaries, as well as for

some low-income Medicare beneficiaries who are not Medicaid-eligible. TennCare pays the Medicare premiums and cost-sharing obligations for these people, as well as paying for services covered up to the Medicare deductible.

**Home and community based waiver services** are services delivered under the TennCare HCBS waiver, which is a separate waiver from the TennCare managed care waiver. Tennessee has three HCBS waiver programs, two for elderly and/or disabled people, and one large waiver for persons with mental retardation. Services covered by the HCBS waiver for persons with mental retardation are shown in Table 2 in Attachment B. These services are *in addition to* services covered by the TennCare MCOs and BHOs. They are delivered outside the MCOs and BHOs by service providers under contract to the Division of Mental Retardation Services. Where there are similarities between HCBS waiver services and MCO/BHO covered services, Table 2 includes an explanation of which entity is responsible.

## **12. How do I go about getting services from TennCare for a student who has disabilities?**

All TennCare services, except for EPSDT screenings (see below) must be **medically necessary**. The TennCare definition of “medically necessary” is as follows:

*Medical assistance services or supplies provided by an institution, physician, or other provider that are required to identify or treat a TennCare enrollee’s illness, disease, or injury and which are:*

- a. Consistent with the symptoms or diagnosis and treatment of the enrollee’s illness, disease, or injury, and*
- b. Appropriate with regard to standards of good medical practice; and*
- c. Not solely for the convenience of an enrollee, physician, institution, or other provider; and*
- d. The most appropriate supply or level of services which can safely be provided to the enrollee. When applied to the care of an inpatient, it further means that services for an enrollee’s medical symptoms or condition require that the services cannot be safely provided to the enrollee as an outpatient; and*
- e. When applied to enrollees under 21 years of age, services shall be provided in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Reconciliation Act of 1989.*

Except in the event of emergencies, a basic premise of the TennCare program is to **start with the primary care provider**. Every TennCare enrollee has a primary care provider

through his or her MCO. Sometimes the PCP's name is on the enrollee's MCO card. If it is not, you can find out who the PCP is by contacting the MCO at the telephone number shown on the card.

Make an appointment for a check-up with the individual's PCP. That person can then be a source of referral for other services, such as specialists' services. Keep in mind that in order for the MCO or BHO to pay for a service, it must be "medically necessary."

EXAMPLE 3: Evaluations are required for your IDEA students at regular intervals. Betsy Ellis has been identified under IDEA and the time has come for her to have an evaluation. Betsy's primary care provider is Dr. Brown. Dr. Brown may agree that it would be nice for Betsy to have an evaluation, but he can find no medical reason why such an evaluation is necessary. *You should not expect that Dr. Brown will order an evaluation for Betsy or that the MCO will pay for such an evaluation simply because the school system requires it in order to serve Betsy.* An evaluation will be paid for by TennCare only when it is medically necessary for Betsy.

If a particular health service has been identified in the IEP as being necessary for a child, this referral should be sent to the child's PCP and/or his MCO. The MCO is required to act on the referral and either provide the service or provide an assessment of what the child may need.

### **13. What is "prior authorization," and why is it important?**

A number of MCO and BHO services require "prior authorization" in order for them to be paid for by the MCO or BHO. "Prior authorization" means that the provider must call the MCO or BHO and explain why a particular service is medically necessary for a particular enrollee. MCOs and BHOs may agree that the service is medically necessary; however, they have the discretion to require that the service be delivered by a provider in their network, unless it is an emergency. If a medical professional prescribes a covered service which the MCO or BHO determines is not medically necessary, the enrollee may appeal the MCO's or BHO's decision. (See response to Question ?? )

***School systems should not expect that they can simply provide services without notifying the MCO/BHO and then bill them later. Services must be authorized in accordance with MCO/BHO procedures in order to be paid for by the MCO/BHO.***

### **14. How can I get help for a TennCare enrollee in the event of an emergency?**

In an emergency, you should take the individual to the nearest health care provider, regardless of whether or not that provider is a member of the enrollee's MCO or BHO network. *You should be aware that the State requires MCOs and BHOs to deliver emergency services without prior authorization and without requiring that the service be*

*delivered by a network provider.* MCOs and BHOs usually ask that providers of emergency services let them know about the emergency situation within 24 hours after it has occurred. The State's definition of **emergency medical services** is as follows:

*A sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity that the absence of immediate medical attention could reasonably result in:*

- a. Permanently placing an enrollee's health in jeopardy,*
- b. Causing other serious medical consequences,*
- c. Causing impairments to bodily functions, or*
- d. Causing serious or permanent dysfunction of any body organ or part.*

**15. Can I get mental health crisis services for a student who is experiencing a psychiatric crisis?**

Yes. You can call a statewide toll-free number (1-800-809-9957), which will connect you to the provider of crisis services in your community. The child does not have to be TennCare-eligible to get mental health crisis services.

<h2>Step Three: Understanding EPSDT</h2>
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**16. What is EPSDT, and how can it help my students?**

"EPSDT" stands for Early and Periodic Screening, Diagnosis, and Treatment. This is a very important program for children under the age of 21.

Every student you have who is TennCare-eligible and who is also under the age of 21 is eligible for EPSDT. These students should get regular check-ups even if there is no apparent health problem. EPSDT screens should be provided by the MCOs at the following times:

***For infants and toddlers:***

At birth	4 months old	15 months old
2-4 days old	6 months old	18 months old
1 month old	9 months old	24 months old
2 months old	12 months old	

***For older children and adolescents:***

3 years old	11 years old	17 years old
4 years old	12 years old	18 years old
5 years old	13 years old	19 years old
6 years old	14 years old	20 years old
8 years old	15 years old	
10 years old	16 years old	

If you or someone who works with the child suspects a problem, you should go ahead and arrange for an EPSDT check-up even if it is not yet time for one. This referral is called an “interperiodic screen” and *must* be followed up on by the MCO. EPSDT screens, including “interperiodic screens,” *do not* have to be “medically necessary” in order to be covered by the MCO.

EXAMPLE 4: Mary Anderson, who is 12 years old, had an EPSDT screening six months ago. She is not due to have another one for another six months. Mary’s teacher notices on an outing to the park that Mary seems to be having trouble hearing. The teacher should refer Mary to her PCP for an *interperiodic screen* to find out if there is a problem that needs more attention. There is no need to wait until the next regularly scheduled *periodic screening*.

The individual in the MCO who does the EPSDT screens is generally the child’s primary care provider (PCP). If the child’s PCP does not do EPSDT check-ups, contact the child’s MCO and they will help you find an EPSDT provider.

Just as important as the screenings is the follow-up. Providers who perform EPSDT screens may identify potential health, developmental, or behavioral problems. They are responsible for making referrals to other MCO and BHO providers to do further testing or to provide treatment, as appropriate. While there is no requirement that EPSDT periodic or interperiodic screenings be medically necessary, additional testing and treatment services must meet the medical necessity criteria outlined in the response to Question 12.

**17. What about children who are in State custody?**

The Department of Children’s Services (DCS) is responsible for children in State custody. A list of EPSDT services covered by the MCOs, BHOs, and DCS is provided in Table 3 in Attachment B.

**18. What mental health and substance abuse services are available under TennCare for children with disabilities?**

Mental health and substance abuse services are delivered under the TennCare Partners Program, which is a “carve-out” of the TennCare program. Two BHOs have contracted with the State to deliver these services.

There are two levels of mental health and substance abuse benefits for TennCare enrollees. The basic level of benefits includes psychiatric inpatient facility and physician services, outpatient mental health services, limited alcohol and drug abuse benefits (see Table 1 in Attachment B), pharmacy and lab services, transportation, and crisis services. The enhanced level of benefits includes mental health case management, residential treatment, psychiatric housing services, unlimited alcohol and drug abuse benefits, specialized outpatient mental health services, and psychiatric rehabilitation services. These services are offered in addition to all the basic benefits.

The basic level of benefits is available to all TennCare enrollees, regardless of whether they happen to have other diagnoses such as mental retardation. The enhanced benefits are available when medically necessary for all children under age 21 and for those adults 21 and older who have been determined to be Severely and/or Persistently Mentally Ill, or “SPMI.”

You may hear two terms used in discussions of persons with serious mental illnesses and functional impairments. “SPMI” is the term used for individuals 18 years of age and older, while “SED” (Seriously Emotionally Disturbed) is the term used for children under the age of 18. SPMI and SED determinations are made by Community Mental Health Centers, Regional Mental Health Institutes, and Community Case Management Agencies, working under contract to the BHOs. If you have a client with mental retardation who you believe is also mentally ill, you can call the nearest CMHC or CMHA for an appointment to get a SPMI or SED rating. If you do not know where to call or you have trouble making the appointment, call the individual’s BHO for assistance.

Because of EPSDT, TennCare enrollees who are either SPMI or SED *and* who are under age 21 are eligible for any benefit covered by TennCare when this service is medically necessary. This means that an individual does not have to carry the SED or SPMI label in order to be eligible for enhanced services which have been determined to be medically necessary for him. For enrollees 21 years of age and older, medically necessary enhanced benefits are available only for persons labeled SPMI.

If you have questions about mental health or substance abuse benefits, you can call the enrollee’s BHO or the TennCare Partners Information Line at 1-800-758-1638 (747-7339 in the Nashville area).

**19. Is there someone who can help a family who is having trouble accessing TennCare services for their disabled child?**

Yes. There is a Consumer Advocacy Line which has been set up by TennCare for the express purpose of assisting individuals with multiple health problems and others who are having difficulty navigating the TennCare system. The number for the Consumer Advocacy Line is 1-800-722-7474 (313-9240 in the Nashville area). They will assign a caseworker to help the individual having difficulty or his representatives.

**20. What transportation services are available through TennCare for my students?**

TennCare pays for transportation to covered services for those enrollees who do not have an available source of transportation. The MCO pays for transportation to MCO-covered services, while the BHO pays for transportation to BHO-covered services. The Member Handbooks from the MCOs and BHOs outline the procedures for requesting transportation services.

**21. What is the “EPSDT Consent Decree,” and what does it mean for students identified under IDEA?**

In March of 1998 the State entered into a Consent Decree with the Tennessee Justice Center to assure that all TennCare enrollees under the age of 21 have access to all services required under EPSDT.

Among the issues addressed by the Consent Decree is coordination of services, including coordination of health services for children identified under IDEA. Paragraph 81 of the decree contains the requirement that “MCOs shall accept the IEP indication of a medical problem or shall have the child appropriately tested.” This means that if the IEP includes a recommendation for a particular health service for a TennCare-eligible child, this recommendation may be forwarded to the child’s MCO for action. The MCOs may accept the recommendation and provide the service, or they may initiate additional testing to find out what services are needed. The MCO has the discretion to require that its providers be used for delivery of the service, as long as these providers are geographically located to meet the State’s access standards. If the MCO determines that the requested service is not medically necessary, then the child and his family may appeal the MCO’s decision. (See below.)

<h2>Step Four: Dealing with Problems</h2>
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**22. How do TennCare enrollees complain about TennCare or file an appeal?**

When a client or a client’s representative has a concern about TennCare, the first step should be to talk to the provider and the MCO or BHO. If the situation cannot be resolved at that level, the client may file a *complaint* or an *appeal*. MCOs and BHOs have contact persons available to assist enrollees with complaints and appeals. You can call them directly or call the Tennessee Department of Health Appeals Unit at 1-800-560-5767 (532-6700 in the Nashville area).

A *complaint* refers to the enrollee’s right to protest any action taken (or not taken, depending on the circumstances) by an MCO, BHO, or service provider *other than* the denial, reduction, termination, suspension, or delay of a medically necessary covered

service. Complaints are made in writing to the MCO or BHO, and written decisions must be rendered by the MCO or BHO within 30 days of receipt.

An *appeal* refers to the enrollee's right to protest any action taken by the MCO or BHO which results in a denial, termination, suspension, reduction, or delay of a medically necessary covered service. MCOs and BHOs are required to issue a plain language written notice to the enrollee of any action they are taking to deny, terminate, suspend, reduce, or delay medical assistance. Notices of actions to terminate, suspend, or reduce ongoing services must be sent to the enrollee *before* the action occurs, except in certain circumstances when the MCO or BHO is required to send the notice to the enrollee *no later than* the date of action. Notices of action are generally precipitated by a medical professional's recommendation, so appeals of these proposed actions should be made when there is a recommendation by another medical professional that the enrollee needs the service which is being denied, terminated, suspended, reduced, or delayed.

Once an enrollee has received a written notice of denial, termination, suspension, reduction, or delay of medically necessary covered services, he or his representative has several options if he disagrees with the proposed course of action. These options are as follows:

- a. He may request a *reconsideration* from the MCO or BHO of the adverse action. The MCO or BHO must issue a reconsideration decision within 14 calendar days of the date on which they receive the request from the enrollee, unless the enrollee requests a longer time.
- b. He may *appeal* the adverse action to the MCO or BHO. The appeal must be made in writing within 30 days of the enrollee's receipt of the written notice. Reasonable accommodations will be made for persons with disabilities who require assistance with their appeal. These accommodations could include such things as an appeal in person, by telephone, or by TTY services or other communication device for people with disabilities. The appeal must be resolved in writing within 90 days from the date the appeal is received. *All* of the following events must occur within this 90 day period:
  - The MCO or BHO reviews the appeal and makes a decision;
  - If the issue is not resolved at the MCO/BHO level, TennCare reviews the appeal and makes a decision;
  - If the issue is not resolved by TennCare, a hearing for the enrollee before an impartial hearing officer or administrative judge is arranged;
  - The impartial hearing officer or administrative judge renders a written decision.
- c. He may request an *expedited appeal* if the action proposed by the MCO or BHO will result in denying him urgent care. The enrollee or his representative AND his primary care provider or treating specialist

physician must attest that the enrollee requires urgent care in order for his appeal to be expedited. Expedited appeals must be resolved within 31 days from the date the appeal is received. *All* of the following events must occur within the 31 day period:

- The MCO or BHO reviews the appeal and makes a decision;
  - If the issue is not resolved at the MCO/BHO level, TennCare reviews the appeal and makes a decision;
  - If the issue is not resolved by TennCare, a hearing for the enrollee before an impartial hearing officer or administrative judge is arranged;
  - The impartial hearing officer or administrative judge renders a written decision.
- d. If the action proposed by the MCO or BHO will result in terminating, reducing, or suspending ongoing services, the enrollee or his representative may appeal and request *continuation of services* during the appeal process. The request for continuation of services must be made within 10 days of the enrollee's receipt of notice from the MCO or BHO and before the service actually ends.

For more information, Attachment C contains a list of useful telephone numbers, and Attachment D contains a glossary of acronyms.

# **Attachment A**

## **TennCare MCOs and BHOs**

# MANAGED CARE ORGANIZATIONS

For Medical Services Only

Updated 09-22-98

<u>ADMINISTRATIVE OFFICES</u>		<u>PROVIDER SERVICES</u>	<u>MEMBER SERVICES</u>
<b>VOLUNTEER STATE HEALTH PLAN</b> <i>(BlueCare: Formerly BlueCross BlueShield of TN)</i> 801 Pine Street Chattanooga, Tennessee 37402-2555 ATT: Vicky Gregg, President and CEO (423) 752-6767 FAX: (423) 752-6790 <i>Serving: First Tennessee</i> <i>Southeast</i> <i>Upper Cumberland</i> <i>Mid Cumberland</i> <i>South Central Tennessee</i> <i>Northwest Tennessee</i> <i>Southwest Tennessee</i> <i>Davidson County</i> <i>Hamilton County</i> <i>Shelby County</i> <i>Knox County</i> <i>East Tennessee</i>	<b>First Tennessee</b>  <b>Southeast, Upper Cumberland, and Hamilton County</b>  <b>Mid Cumberland, South Central, and Davidson County</b>  <b>Northwest, Southwest and Shelby County</b>  <b>East Tennessee and Knox County</b>	<b>1-800-468-9736</b>  <b>1-800-468-9786</b>  <b>1-800-818-0962</b>  <b>1-800-468-9772</b>  <b>1-800-468-9751</b>	<b>1-800-468-9698</b>  <b>1-800-468-9775</b>  <b>1-800-205-4983</b>  <b>1-800-468-9770</b>  <b>1-800-468-9771</b>
<b>HERITAGE NATIONAL HEALTH PLAN OF TENNESSEE, INC.</b> <i>(John Deere Health Care/Heritage National Health Plan)</i> Executive Tower I 408 North Cedar Bluff Road, Suite 400 Knoxville, Tennessee 37923 ATT: Joanna Richards, TennCare Supervisor (423) 769-1536 FAX: (423) 690-1941 <i>Serving: First Tennessee</i> <i>Knox County</i> <i>East Tennessee</i> <i>Hamilton County;</i> <i>Southeast Tennessee</i>		<b>(423) 690-5572</b>	<b>1-800-778-1993</b>
<b>MEMPHIS MANAGED CARE CORPORATION</b> <i>(TLC Family Care Healthplan)</i> P.O. Box 49 Memphis, TN. 38101 ATT: Karl V. Kovacs, Executive Director (901) 725-7100 FAX: (901) 725-3817; (901) 725-2844 <i>Serving: Shelby County</i> <i>Northwest</i> <i>Southwest</i>	<b>Shelby County</b>  <b>Northwest and Southwest</b>	<b>(901) 725-7100</b> <b>Ext. 3015</b>  <b>1-800-473-6523</b>	<b>(901) 725-7100</b>  <b>1-800-473-6523</b>
<b>FOR FED-X PURPOSES:</b> 1407 Union Avenue, Suite 1100 Memphis, Tennessee 38104-3627			

**ADMINISTRATIVE OFFICES****PROVIDER  
SERVICES****MEMBER  
SERVICES****OMNICARE HEALTH PLAN, INC.***(OmniCare Health Plan)*

1991 Corporate Ave., 5th Floor

Memphis, Tennessee 38132

ATT: Osbie L. Howard, Executive Director

(901) 346-0064 FAX: (901) 348-2212

*Serving: Shelby County**Davidson County*

1-300-346-0034

1-800-876-9758

**PHOENIX HEALTH CARE OF TENNESSEE, INC.***(Phoenix Healthcare)*

3401 West End Avenue, Suite 470

Nashville, Tennessee 37203

ATT: Anica Howard, Executive Director

(615) 460-0262 FAX: 460-0288

*Serving: Statewide*

1-800-242-8840

1-800-449-3339

**PREFERRED HEALTH PARTNERSHIP OF TENNESSEE, INC.***(Preferred Health Partnership (PHP))*

1420 Centerpoint Blvd.

Knoxville, Tennessee 37932

ATT: Ruth Allen, Vice President,

Government Programs

(423) 470-7470 FAX: (423) 470-7404

*Serving: Statewide*

1-800-747-0008

1-800-747-0008

**PRUDENTIAL HEALTH CARE PLAN, INC.***(Prudential Community Care)*

3150 Lenox Park Blvd., Suite 110

Memphis, Tennessee 38115

ATT: Michael Jones, Government Program Coordinator

(901) 541-9362 FAX: (901) 368-0643

*Serving: Shelby County*

1-800-778-5463

1-800-778-5463

**TENNESSEE MANAGED CARE NETWORK***(Access...MedPLUS)*

210 Athens Way

Nashville, Tennessee 37228

ATT: Anthony J. Cebrun, J.D., M.P.H., Chief Executive Officer

(615) 255-2700 FAX: (615) 313-2394

{205 Reidhurst - (615) 329-2016 FAX: (615) 313-2392}

*Serving: Statewide*

1-800-494-8068

1-800-523-3112

**VUMC CARE, INC.***(VHP Community Care)*

706 Church Street, Suite 500

Nashville, Tennessee 37203-3511

ATT: James Geraughty, M.D., Interim President

(615) 782-7821 FAX: (615) 782-7812

*Serving: Davidson County*

(615) 782-7878

(615) 782-7878

# BEHAVIORAL HEALTH ORGANIZATIONS

For Mental Health/Substance Abuse Services Only

Updated 09-22-98

<u>ADMINISTRATIVE OFFICES</u>	<u>PROVIDER SERVICES</u>	<u>MEMBER SERVICES</u>
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Premier Behavioral Systems of Tennessee  
222 Second Avenue North, Suite 220  
Nashville, Tennessee 37201

1-800-325-7864

1-800-325-7864

ATT: Charles D. Klusener, Chief Manager  
(615) 313-4549 FAX: (615) 743-2131

*Serving: Statewide*

Tennessee Behavioral Health, Inc.  
209 10th Avenue South, Suite 547  
Nashville, Tennessee 37203

1-800-447-7242

1-800-447-7242

ATT: Charles D. Klusener, President  
(615) 313-4549 FAX: (615) 743-2131

*Serving: Statewide*

## MCOs AND BHOs BY REGION

### FIRST TENNESSEE REGION

Carter, Greene, Hancock, Hawkins,  
Johnson, Sullivan, Unicoi, Washington

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9736	1-800-468-9698
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008

#### BHO

Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### EAST TENNESSEE REGION

Anderson, Blount, Campbell, Claiborne,  
Cocke, Grainger, Hamblen, Jefferson, Loudon,  
Monroe, Morgan, Roane, Scott, Sevier, Union

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9751	1-800-468-9771
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008

#### BHO

Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## **SOUTHEAST REGION**

Bledsoe, Bradley, Franklin, Grundy, Marion,  
McMinn, Meigs, Polk, Rhea, Sequatchie

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9786	1-800-468-9775
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008

### **BHO**

Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## **UPPER CUMBERLAND REGION**

Cannon, Clay, Cumberland, Dekalb, Fentress,  
Jackson, Macon, Overton, Pickett, Putnam,  
Smith, VanBuren, Warren, White

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9786	1-800-468-9775
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008

### **BHO**

Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## MID CUMBERLAND REGION

Cheatham, Dickson, Houston, Humphreys,  
Montgomery, Robertson, Rutherford, Stewart,  
Sumner, Trousdale, Williamson, Wilson

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-818-0962	1-800-205-4983
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## SOUTH CENTRAL TENNESSEE REGION

Bedford, Coffee, Giles, Hickman, Lawrence, Lewis,  
Lincoln, Marshall, Maury, Moore, Perry, Wayne

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-818-0962	1-800-205-4983
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## NORTHWEST TENNESSEE REGION

Benton, Carroll, Crockett, Dyer, Gibson,  
Henry, Lake, Obion, Weakley

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
TLC Family Care Healthplan	1-800-473-6523	1-800-473-6523
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## SOUTHWEST TENNESSEE REGION

Chester, Decatur, Fayette, Hardeman,  
Hardin, Haywood, Henderson, Lauderdale,  
Madison, McNairy, Tipton

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
TLC Family Care Healthplan	1-800-473-6523	1-800-473-6523
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**DAVIDSON COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-818-0962	1-800-205-4983
OmniCare Health Plan	1-800-346-0034	1-800-876-9758
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
VHP Community Care	(615) 782-7878	(615) 782-7878
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**HAMILTON COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9786	1-800-468-9775
John Deere Health Care/Heritage National Health Plan	(423) 590-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## KNOX COUNTY

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9751	1-800-468-9771
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## SHELBY COUNTY

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
OmniCare Health Plan	1-800-346-0034	1-800-876-9758
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
Prudential Community Care	1-800-778-5463	1-800-778-5463
TLC Family Care Healthplan	(901) 725-7100	(901) 725-7100 EXT. 3015
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**OUT - OF - STATE**

<b>MCO</b>		<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS		1-800-494-8068	1-800-523-3112
BlueCare	(Physician)	(423) 755-5992	1-800-836-6227
	(Hospital)	(423) 755-2043	
	(Other)	(423) 755-5973	
Phoenix Healthcare		1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)		1-800-747-0008	1-800-747-0008
<b>BHO</b>			
Premier Behavioral Systems of Tennessee		1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.		1-800-447-7242	1-800-447-7242

## **Attachment B**

### **TennCare Covered Services**

**TABLE 1**  
**MCO and BHO Covered Services**

Service	Covered by MCO	Covered by BHO	Comments
Inpatient hospital days	X		As medically necessary. Preadmission approval and concurrent reviews allowed.
Psychiatric inpatient facility services		X	As medically necessary for enrollees under 21 and over 65. For enrollees 21-65 who are not Severely and/or Persistently Mentally Ill (SPMI), limited to 30 days per occasion and 60 days per year.
24-hour psychiatric residential treatment		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Psychiatric housing/residential care		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Outpatient hospital days	X		As medically necessary.
Physician inpatient services	X		As medically necessary. This shall include acupuncture performed by a physician or a registered nurse as an anesthetic in connection with a surgical procedure.
Physician psychiatric inpatient services		X	As medically necessary.
Physician outpatient services	X		As medically necessary. This shall include acupuncture performed by a physician or a registered nurse as an anesthetic in connection with a surgical procedure.

Service	Covered by MCO	Covered by BHC	Comments
Outpatient mental health services		X	As medically necessary.
Specialized psychiatric outpatient and symptom management services		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Inpatient and outpatient substance abuse treatment services		X	As medically necessary for children under 21 and for enrollees 21 and older who are SPMI. For non-SPMI adults 21 and older, limited to 10 days detox; inpatient and outpatient substance abuse benefits for these enrollees have a maximum lifetime limitation of \$30,000.
Specialized psychiatric crisis services		X	As medically necessary.
Lab & X-ray services	X		As medically necessary.
Newborn services	X		As medically necessary including circumcisions performed by a physician.
Hospice care (must be provided by an organization certified pursuant to Medicare Hospice regulations)	X		As medically necessary.

Service	Covered by MCO	Covered by BHO	Comments
Dental services	X		Preventive, diagnostic, and treatment services for enrollees under age 21. Services for enrollees age 21 and older limited to cases of accidental injury to or neoplasms of the oral cavity, life threatening infection, accidental injury to natural teeth including their replacement (limited to the cost of bridgework of the replacement of teeth injured in an accident unless teeth implants are medically necessary) and the removal of impacted wisdom teeth. (The adult dental "accident" must be caused by some external force, like a car accident, not by some normal act of mastication, or grinding of teeth while sleeping, or any other naturally occurring circumstance.) Orthodontics limited to individuals under age 21 except when an orthodontic treatment plan is approved prior to the enrollee's attaining 20 ½ years of age, and treatment is initiated prior to the recipient attaining 21 years of age, or when orthodontic treatment is the result of facial hemiatrophy or congenital birth defects (if enrollee was covered by TennCare at birth).
Vision services	X		Preventive, diagnostic and treatment services (including eyeglasses) for enrollees under age 21. The first pair of cataract glasses or contact lens/lenses following cataract surgery is covered for adults.
Home health care	X		As medically necessary.
Pharmacy	X		As medically necessary. Non-covered therapeutic classes as described in TennCare contract. DESI, LTE, IRS drugs excluded.

Service	Covered by MCO	Covered by BHO	Comments
Psychiatric pharmacy services and pharmacy-related lab services		X	As of July 1, 1998, psychiatric pharmacy services are being provided directly by the State.
Durable medical equipment	X		As medically necessary.
Medical supplies	X		As medically necessary.
Emergency ambulance transportation	X	X	As medically necessary.
Non-emergency ambulance transportation	X	X	As medically necessary.
Non-emergency transportation	X	X	<p>As necessary for enrollees lacking accessible transportation for covered services.</p> <p>The travel to access primary care and dental services must meet the requirements of the waiver terms and conditions. The availability of specialty services, as related to travel distance, should meet the usual and customary standards for the community. However, in the event the MCO is unable to negotiate such an arrangement for an enrollee, transportation must be provided regardless of whether or not the enrollee has access to transportation. If the enrollee is a child, transportation must be provided for the child and an accompanying adult.</p>
Transportation to covered mental health and substance abuse services		X	<p>As medically necessary for enrollees lacking accessible transportation.</p> <p>The availability of specialty services, as related to travel distance, should meet the usual and customary standards for the community. However, in the event the BHO has no contracted provider for specialty services that meets the travel distance or other access</p>

Service	Covered by MCO	Covered by BHO	Comments
			requirements, transportation must be provided to an enrollee regardless of whether or not the enrollee has access to transportation. If the enrollee is a child and needs to be accompanied by an adult, transportation must be provided for both the child and the accompanying adult.
Community health services	X		As medically necessary.
Renal dialysis services	X		As medically necessary.
EPSDT services for enrollees under age 21 in accordance with federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.	X		Screening, diagnostic, and follow-up treatment services as medically necessary in accordance with federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989 for enrollees under 21. Screens shall be in accordance with the periodicity schedule set forth in the latest "American Academy of Pediatrics Recommendations for Preventive Pediatric Care" and all components of the screens must be consistent with the latest "American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care."

Service	Covered by MCO	Covered by BHO	Comments
Mental health case management		X	As medically necessary for children under 21. Must be offered to all persons with an assessment of CRG 1, CRG 2, or TPG 2. As clinically indicated for CRG 3.
Rehabilitation services	X		As medically necessary when determined cost effective by the MCO. All medically necessary services shall be provided to enrollees under 21 years of age in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.
Psychiatric rehabilitation services		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Chiropractic services	X		When determined cost effective by the MCO.
Private duty nursing	X		As medically necessary and when prescribed by an attending physician for treatment and services rendered by a registered nurse (R.N.) or a licensed practical nurse (L.P.N.), who is not an immediate relative.
Speech therapy	X		As medically necessary, by a Licensed Speech Therapist to restore speech (as long as there is continued medical progress) after a loss or impairment. The loss or impairment must not be caused by a mental, psychoneurotic, or personality disorder. All medically necessary services shall be provided to enrollees under 21 years of age in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.

Service	Covered by MCO	Covered by BHO	Comments
Sitter services	X		As medically necessary, a sitter who is not a relative may be used where an enrollee is confined to a hospital as a bed patient and certification is made by a network physician that R.N. or L.P.N. care is needed and neither is available.
Convalescent care	X		Upon receipt of proof that a covered person has incurred medically necessary expenses related to convalescent care, the Plan shall pay for up to and including the 100 <sup>th</sup> day of confinement during any calendar year for convalescent facility(ies) room, board, and general nursing care, provided: (1) a physician recommends confinement for convalescence; (2) the enrollee is under the continuous care of a physician during the period of confinement; and (3) the confinement is required for other than custodial care.
Donor organ procurement	X		As medically necessary for a covered organ transplant.

## Table 2

# Services Covered by the TennCare Home and Community Based Services Waiver for Persons with Mental Retardation

*NOTE: Most of the services covered by the HCBS waiver are not covered by TennCare. In cases where there may be some overlap, a differentiation is made between coverage of the service under the HCBS waiver and coverage under TennCare.*

Services Covered by the HCBS Waiver	Relationship to TennCare-Covered Services
Support coordination	Not covered by TennCare.
Home health aide services	As currently defined by the waiver, this service is the same as personal assistance (see below). TennCare covers medically necessary home health services. Personal assistance services are covered by the HCBS waiver.
Respite care	Not covered by TennCare.
Residential habilitation	Not covered by TennCare.
Day habilitation	Not covered by TennCare.
Supported employment	Not covered by TennCare.
Environmental accessibility adaptations	Durable medical equipment is provided by the MCOs. "Environmental accessibility adaptations" are necessary modifications of the home (widening doorways to accommodate wheelchairs, installing wheelchair ramps, modification of bathroom facilities), and are covered by the HCBS waiver.
Transportation	Transportation to MCO- and BHO-covered services is provided by the MCO and BHO. Transportation to waiver services, to community services or other activities specified in the individual's Plan of Care is provided by the HCBS waiver.
Specialized equipment and supplies and assistive technology	Durable medical equipment (including orthotics and prosthetics) and medical supplies, as well as augmentative communication devices, are the responsibility of the MCO; other items not normally covered by the MCO are covered by the HCBS waiver. Hearing aids and related audiological testing for children under 21 are covered by the MCO; hearing aids and related audiological testing for adults 21 and older are covered by the HCBS waiver.
Family training	Not covered by TennCare.
Community participation	Not covered by TennCare.
Family-based residential	Not covered by TennCare.

Services Covered by the HCBS Waiver	Relationship to TennCare-Covered Services
living	
Supported living	Not covered by TennCare.
Crisis intervention	Coverage of specialized psychiatric crisis services is the responsibility of the BHO. The HCBS waiver covers "crisis intervention services," which are defined as an intensive level of intervention and support (usually time limited) for individuals at times of behavioral, personal, or external crisis. This service may also include evaluation, training, and counseling for the individual, and training and consultation to families and service providers. Training and consultation means teaching and demonstrating the implementation strategies outlined in the Behavior Intervention Plan developed by a psychiatrist, psychologist, or Behavior Intervention Specialist.
Personal assistance	Not covered by TennCare.
Enhanced dental services	Medically necessary dental services for children under 21 are the responsibility of the MCO. There are limited dental services available for adults 21 and older through the MCO. Additional dental services for adults are covered by the HCBS waiver.
Nursing related services	The MCO is responsible when intermittent skilled nursing visits or private duty nursing are necessary for an enrollee who is homebound. The HCBS waiver is responsible for these services when the enrollee is not homebound.
Nutrition services	The MCO is responsible for covering nutrition services when there is a specific medical illness or condition (e.g., renal disease, diabetes mellitus), but not when the primary indication is based on the diagnosis of mental retardation, developmental disability, or related conditions. In these circumstances, the HCBS waiver is responsible.
Physical therapy	The MCO is responsible for medically necessary physical therapy related to acute conditions that have recently occurred. The HCBS waiver is responsible for other types of physical therapy, including routine evaluations and re-evaluations, provision of chronic care, and physical therapy for loss or impairment that occurred remotely in time.
Occupational therapy	The MCO is responsible for medically necessary occupational therapy for conditions resulting from acute illnesses that have recently occurred. The HCBS waiver is responsible for other types of occupational therapy, including routine evaluations and re-evaluations, provision of chronic care, and occupational therapy related to a condition that occurred remotely in time.

Services Covered by the HCBS Waiver	Relationship to TennCare-Covered Services
Speech, hearing, and language services	<ul style="list-style-type: none"> <li>• The MCO is responsible for coverage of speech therapy when loss or impairment of speech is due to an acute event that has recently occurred. The HCBS waiver is responsible for other types of speech therapy, including routine evaluations and re-evaluations, provision of chronic care, and speech therapy related to a condition that occurred remotely in time.</li> <li>• The MCO is responsible for the treatment of diseases or conditions of the ear requiring medical or surgical intervention. For children under 21, the MCO is also responsible for provision of hearing aids and related audiological testing, as well as routine evaluations and re-evaluations. For adults 21 and older, these services are provided by the HCBS waiver.</li> </ul>

# Table 3

## Scope of Covered Benefits Under EPSDT

*Note 1: All services other than EPSDT screenings must be medically necessary.*

*Note 2: DCS "physical custody" means that DCS provides or arranges for the placement of the individual. Some children may be in DCS legal custody, but not physical custody. These are children who have been placed in DCS custody by the court but who live with parents or adoptive parents. TennCare-eligible children in DCS legal but not physical custody receive the same services from the BHOs that children who are not in custody receive.*

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
1	Acute inpatient hospital services	X		
2	Psychiatric inpatient facility services		X	
3	Outpatient hospital services	X		
4	Outpatient mental health services		X	
5	Physician inpatient services	X		
6	Physician psychiatric inpatient services		X	
7	Physician outpatient services	X		
8	Inpatient and outpatient substance abuse treatment		X (as medically necessary)	X (for children in DCS)

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
	programs		except for enrollees who are children in DCS physical custody; for these children, the BHO is responsible for a maximum of 10 days detox and a maximum lifetime limitation of \$30,000 on inpatient and outpatient substance abuse treatment benefits)	physical custody, detox days in excess of 10 and inpatient and outpatient substance abuse treatment benefits in excess of the maximum lifetime limitation of \$30,000)
9	Lab & x-ray services	X (except for lab services related to psychotropic or substance abuse drugs)	X (lab services related to psychotropic or substance abuse drugs)	
10	Newborn services	X		
11	Hospice care	X		
12	Dental services	X		
13	Vision services	X		
14	Home health care For psychiatric home health care, see categories #4 and #32.	X		
15	Pharmacy	X (except for drugs related to mental health and substance abuse treatment)	X* (for mental health and substance abuse treatment)	
16	Durable medical equipment	X		

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
17	Medical supplies	X		
18	Emergency ambulance transportation	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
19	Non-emergency ambulance transportation	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
20	Non-emergency transportation to covered services	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
21	Community health services <i>For Community Mental Health Center services, see categories #4 and #32.</i>	X		
22	Renal dialysis services	X		
23	EPSDT screenings	X		
24	EPSDT diagnostic and treatment services	X (except for mental health and substance abuse problems)	X (for mental health and substance abuse problems)	
25	Developmental assessments	X (unless the child has a	X (if the child has a	

Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
	previously diagnosed mental illness)	previously diagnosed mental illness)	
26 Rehabilitation services	X (except for psychiatric rehabilitation services)	X (psychiatric rehabilitation services for children not in DCS physical custody)	X (psychiatric rehabilitation services for children in DCS physical custody)
27 Chiropractic services	X (when determined cost effective by the MCO)		
28 Private duty nursing <i>For psychiatric private duty nursing services, see categories #4 and #32.</i>	X		
29 Speech therapy	X		
30 Case management	X	X (mental health case management for children not in DCS physical custody)	X (targeted case management for children in State custody or at risk of State custody; mental health case management when medically necessary for children in DCS physical custody)
31 24-hour residential treatment		X (for children not in DCS physical custody)	X (for children in DCS physical custody)
32 Specialized outpatient and symptom management		X (for children not in DCS physical custody)	X (for children in DCS physical custody)

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
	services			
33	Specialized crisis services		X (for children not in DCS physical custody)	X (for children in DCS physical custody)
34	Children's therapeutic intervention services			X (for children in DCS physical or legal custody)
35	Services in an intermediate care facility for the mentally retarded (covered by TennCare outside the MCOs and BHOs)			
36	Services in a nursing facility (covered by TennCare outside the MCOs and BHOs)			

\*Effective July 1, 1998, pharmacy services for mental health and substance abuse drugs are managed and paid for by TennCare outside the BHOs.

The "scope of benefits" provided in the EPSDT Consent Decree (see Section 54) includes the above services. The Consent Decree list is taken from federal statute, which is oriented more toward types of service providers than types of services. The list from the Consent Decree list is provided below, and services are cross-referenced to the services identified in the above chart.

- (a) Inpatient hospital services (other than services in an institution for mental diseases)—see #1.
- (b) Outpatient hospital services; rural health clinic services; and services offered by a federally qualified health center—see #3, #4, #8, #21.
- (c) Other laboratory and X-ray services—see #9.

- (d) EPSDT services, and family planning services and supplies—for EPSDT services, see all services listed in chart; for family planning services and supplies, see #5, #7, #17, #21.
- (e) Physicians' services; medical and surgical services furnished by a dentist—see #5, #6, #7, and #12.
- (f) Medical care, or any other type of remedial care recognized under state law, furnished by licensed practitioners within the scope of their practice as defined by state law—see all services listed in chart.
- (g) Home health care services—see #14.
- (h) Private duty nursing services—see #28.
- (i) Clinic services—see #3, #4, #8, #21, #26, and #32.
- (j) Dental services—see #12.
- (k) Physical therapy and related services—see #5, #7, and #21.
- (l) Prescribed drugs, dentures, and prosthetic devices; eyeglasses—see #13, #15, and #17.
- (m) Other diagnostic, screening, preventive, and rehabilitative services—see #23, #24, #25, #26.
- (n) Services in an intermediate care facility for the mentally retarded (other than in an institution for mental diseases)—see #35.
- (o) Inpatient psychiatric services for individuals under 21—see #2.
- (p) Services furnished by a nurse midwife—see #5, #7, and #21.
- (q) Hospice care—see #11.
- (r) Case management services and TB-related services—for case management services, see #30; for TB-related services, see #1, #3, #5, #7, #9, #15, #17, and #21.
- (s) Respiratory care services—see #14.
- (t) Services furnished by a certified pediatric nurse practitioner or certified family nurse practitioner—see #5, #7, #10.
- (u) Personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded, or institution for mental disease—see #24.
- (v) Any other medical care, and any type of remedial care recognized under state law, specified by the Secretary of the United States Department of Health and Human Services—see all services on above chart.

## **Attachment C**

### **Useful Telephone Numbers**

## Useful Telephone Numbers

TennCare Information Line

1-800-669-1851 (741-4800 in the Nashville area)

TennCare TYY Information Line for persons with hearing impairments

1-800-772-7647 (313-9240 in the Nashville area)

TennCare Spanish-speaking Information Line

1-800-254-7568 (227-7568 in the Nashville area)

TennCare Consumer Advocacy Line

1-800-722-7474 (313-9972 in the Nashville area)

TennCare Partners Mental Health and Substance Abuse Information Line

1-800-758-1638 (242-7339 in the Nashville area)

TennCare Partners Statewide Mental Health Crisis Line

1-800-809-9957

TennCare Appeals Unit

1-800-878-3192

(532-5764 in the Nashville area)

TennCare Bureau Office

615-741-0213

## **Attachment D**

### **Glossary**

# Glossary

<b>BHO</b>	Behavioral Health Organization <i>A TennCare organization that delivers mental health and substance abuse services.</i>
<b>CFR</b>	Code of Federal Regulations <i>Document containing federal regulations for programs such as Medicaid.</i>
<b>CRG</b>	Clinically Related Group <i>A category of individuals 18 and older who have serious mental health service needs.</i>
<b>DCS</b>	Department of Children's Services <i>The Department of State government that oversees the care of children in custody and at risk of custody.</i>
<b>DHS</b>	Department of Human Services <i>The Department of State government that performs Medicaid eligibility determinations.</i>
<b>EPSDT</b>	Early and Periodic Screening, Diagnosis, and Treatment <i>A federal program that requires a comprehensive array of screening, referral, and treatment services for Medicaid-eligible children under the age of 21.</i>
<b>HCBS</b>	Home and Community Based Services <i>A type of Medicaid waiver that offers home and community services to a special population who would otherwise be eligible for institutional placement.</i>
<b>HCFA</b>	Health Care Financing Administration <i>The federal agency that oversees the Medicaid and Medicare programs.</i>
<b>ICF/MR</b>	Intermediate Care Facility for the Mentally Retarded <i>The federal designation for certain residential facilities serving persons with mental retardation.</i>
<b>MCO</b>	Managed Care Organization <i>A TennCare organization that provides all health services except for mental health and substance abuse services and long-term care.</i>

<b>PCP</b>	Primary Care Provider <i>The individual in an enrollee's MCO who is responsible for coordinating his care.</i>
<b>SED</b>	Seriously Emotionally Disturbed <i>A term applied to children under age 18 who have serious mental illnesses and severe functional impairments.</i>
<b>SPMI</b>	Severely and Persistently Mentally Ill <i>A term applied to persons age 18 and older who have serious mental illnesses and severe functional impairments.</i>
<b>SSI</b>	Supplemental Security Income <i>A federal cash assistance program for eligible individuals.</i>
<b>TPG</b>	Target Population Group <i>A category of individuals under age 18 who have serious mental health service needs.</i>

**Attachment D**

**Progress Report**

# Progress Report

## EPSDT Consent Decree

January 31, 1999

Section Number	Topic	Deadline	Progress
39	Policies and Procedures re: Outreach and Informing	Within 180 days (9/11/98)	The EQRO is reviewing member education and outreach programs as part of its annual surveys of the MCOs. A TSOP (TennCare Standard Operating Procedure) has been prepared on this topic and sent to OGC for review.
41	Screening Requirements		A TSOP has been prepared on this topic and is currently being reviewed at TennCare.
42	Interperiodic Screening Requirements		A TSOP will be prepared on this topic.
43	Network Adequacy		The Quality Improvement staff conducted a telephone survey of all primary care providers (PCPs) included in the MCOs' PCP network files. This survey was conducted in order to verify the provider network information submitted by the MCOs and to obtain information needed to evaluate the adequacy of the MCOs' pediatric networks. The survey revealed deficiencies in one county for one MCO and in two counties for a second MCO. Both MCOs have corrected these deficiencies. The Quality Improvement Unit notes that the latest analysis reveals no deficiencies at this time.
44	Review of Screening Requirements	6 mos. for hearing and vision; 18 mos. for	This committee has met eight times. Vision and hearing screening guidelines have been prepared, and the committee is currently working on guidelines for developmental and behavioral screenings. The committee is also developing plans for pilot testing the guidelines in at least one large pediatric practice in the State.

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Section Number	Topic	Deadline	Progress
45	Baseline Percentage of Overall Screening Compliance	behavioral/developmental 110 days (7/11/98)	The baseline percentage of overall screening compliance for Federal Fiscal Year 1996 is 21.9%. The overall screening ratio reported to HCFA on the 416 report for this period was 39%. A medical chart review conducted by the Quality Improvement Unit at TennCare was used to determine the percentage of all 7 components that were actually documented in a sample of records; that percentage was 56.2%. Applying this percentage to the ratio obtained for the 416 report yields 21.9%.
46	Baseline Percentage of Dental Screening Compliance		The baseline percentage of dental screening compliance for Federal Fiscal Year 1996 is 28.2%. There were 124,788 dental screens reported on the HCFA 416 for children in the age groups from 1-20. Since dental screens are not recommended until age 3, the total number of dental screens was divided by the total number of eligible member years of 3-20 years olds, which was 442,106. The resulting percentage is 28.2%.
47	Screening Procedure and/or Diagnosis Codes		A letter was sent from TennCare on May 18, 1998, to the MCOs providing a list of screening procedure and/or diagnosis codes.
53	Review of Practices and Procedures for Referrals	120 days (7/11/98)	The EQRO has received and reviewed referral information from all MCOs. The EQRO found that all MCOs have mechanisms in place for referrals to specialists, behavioral health services, transportation services, and vision and dental care. The EQRO has developed recommendations specific to each MCO regarding modifications that they might make in their programs; these recommendations have been sent to the MCOs. Corrective action plans have been received from the MCOs and are now being reviewed by the Quality Improvement Unit.
54	Provision of All Medically Necessary Services		The EQRO has completed focus reviews for all but one of the MCOs. The final report on focus reviews completed at all MCOs will be submitted to the Bureau of TennCare at the end of January 1999.

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Section Number	Topic	Deadline	Progress
55	Review of MCO Practices Re: Medical Necessity Decisions		A report on this review will be submitted by the EQRO to the Bureau of TennCare by the end of January 1999.
56	Definition of "Medical Necessity"		As part of its annual surveys of the MCOs, the EQRO is reviewing processes used to make medical necessity determinations, including case-by-case decisions. Their report will be submitted to the Bureau of TennCare at the end of January 1999. DCS has incorporated the TennCare definition of "medical necessity" into its Provider Services Manual, which is an attachment to its provider contracts.
57	Absolute Limits; Utilization Controls		The EQRO collected some of this information as part of information collected for Paragraph 53 (above). The review of this information revealed that most MCOs did not define specific service limits and most made reference to services being provided as long as medically necessary. A report will be submitted by the EQRO at the end of January 1999.
58	Standards and Procedures for Monitoring Utilization Review and Prior Approval Procedures	120 days (7/11/98)	The EQRO's annual surveys of each of the MCOs have revealed that only qualified people are making utilization review decisions.
60	DCS Provider Handbook	120 days (7/11/98)	DCS has completed this handbook, which is being readied for shipment.
61i	Provider Agreements		MCO Contract Amendment 5 and BHO Contract Amendment 7 have been finalized. MCO Contract Amendment 6 is in effect but has not yet been finalized.
61ii	Compliance with HCFA Access Standards	130 days (9/1/98)	The Quality Improvement Unit performs quarterly geocross mapping analyses of the MCOs' inpatient provider, primary care provider, dental provider, and outpatient mental health provider networks. When deficiencies are identified, the MCO is given 30 days

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			to demonstrate that the deficiency has been corrected. Failure to correct the deficiency within 30 days results in a retention of the MCO's monthly withhold.
62	Up-to-Date Lists of Specialists	Beginning no later than 180 days (9/11/98)	In MCO Contract Amendment 4, TennCare required that such a listing be given to the PCPs no later than February 1998. An update to the requirement is included in MCO Contract Amendment 5. The Contract Development and Compliance Unit plans to require MCOs to submit proof of compliance.
65	Policy Clarifications	180 days (9/11/98)	A rule outlining the various responsibilities of TennCare and its contractors was presented at rulemaking hearing on December 16, 1998. The public necessity component of this rule was approved and became effective December 22, 1998.
70	Monitoring of MCO Case Management Activities		The Quality Improvement Unit receives a monthly report from the BHOs regarding the number of patients who have been discharged from a psychiatric inpatient facility, the day case management services began for each patient, and the name of the case manager and the case manager's agency affiliation. No withholds are currently in place for failure to deliver case management services.
71ii	Provision of a Comprehensive and Appropriate Scope of Geographically Accessible Child and Adolescent Behavioral Health Services		The TennCare Quality Improvement Unit completes regular GeoAccess mapping analyses of the BHO provider networks. No withholds are currently in place for network deficiencies.
71iii	Enhanced Monitoring of Discharge Planning for Psychiatric and	120 days (7/1/98)	An enhanced monitoring project was begun by TennCare in February, 1998. A new proposal has been developed which will send monitoring teams into inpatient hospital facilities to examine the records of enrollees and determine whether appropriate discharge plans were in place. If significant problems are identified, the BHOs will be

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	Chemical Dependency Facilities		given 30 days to develop a corrective action plan that is acceptable to TennCare; failure to submit a corrective action plan or failure to implement an approved plan will result in retention of a withhold or liquidated damages.
72	Notice of Rulemaking Re: Limits	30 days (4/11/98)	A rulemaking notice was submitted to the Secretary of State's Office at the end of March and filed in the April 15 Tennessee Administrative Register. The hearing was held on May 18. The rule became effective on September 27, 1998.
73	Monitoring of Sample of DCS Children for Service Adequacy	120 days (7/11/98)	DCS entered into a contract with the Vanderbilt Institute for Public Policy Studies to accomplish this project. Total contract amount: \$52,497.
74	Assurance of Non-Emergency Transportation		The EQRO has initiated the development of a tool which was used during its focus surveys to examine the practices and procedures of transportation providers. Up until the time of the Consent Decree, the EQRO reviewed only the MCOs' oversight of their delegated transportation vendors. However, the EQRO began reviewing the transportation providers themselves as part of its annual focus reviews. A report on these reviews will be submitted to TennCare by the EQRO at the end of January 1999.
75	Prohibition of Blanket Restrictions on Transportation		BHO Contract Amendment 6 and MCO Contract Amendment 5 include a provision stating that transportation for children must include transportation for an accompanying adult but that transportation for a child shall not be denied due to lack of parental accompaniment. Both amendments have been finalized.
77	Referral Protocols for Transportation		These protocols will be developed from the EQRO's report (see Paragraph 74 above).
79	List of Statewide Services	Will in 180 days (9/1/98)	A list of statewide services was prepared and sent to the MCOs on September 22, 1998.
80	Coordination of	Will in 240	A TSOP has been prepared on this topic.

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	EPSDT Services with Agencies on Statewide List	days (11/11/98)	
81	Process for Informing MCOs about Children with IEPs	Within 180 days (9/11/98)	A process was developed by TennCare and sent to the MCOs on September 11, 1998. All Special Education Coordinators in Local Education Agencies across the State were notified about sharing IEP information with PCPs. This notification occurred on September 11, 1998. A release form that schools could use in getting permission from parents to contact their children's MCOs was prepared and sent to the Special Education Coordinators on September 30, 1998. In addition, a TennCare handbook for Special Educators was prepared and distributed on December 1, 1998.
82	Strategies for EPSDT Coordination	Within 180 days (9/11/98)	A TSOP has been prepared on this topic.
83	Establishment of Commissioner's Task Force		The Commissioner's Task Force has met once. The staff committee has met twice and is beginning the development of procedures for interdepartmental agreements and dispute resolution.
88	Tennessee Commission on Children and Youth Service Testing Process	120 days (7/11/98)	DCS has accomplished this activity.
89-91	Creation of Expert Review Process	Contractor selected—45 days; contract executed—100 days	DCS entered into a contract with Paul DeMuro to perform this process. The report was submitted in September 1998. Total contract amount: \$97,931.25.

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Section Number	Topic	Deadline	Progress
92	Remedial Plan	12/11/98	The State filed a proposed remedial plan with the Court on December 11, 1998.
94	Tracking System	180 days (9/11/98)	The State already has a tracking system in the form of its systems for reporting encounter data. Glenn Jennings is investigating the possibility of purchasing a new software package for reporting tracking activities; this package would be used by the MCOs. Presentations by two potential vendors have been made to TennCare staff.
95	DCS Tracking System	150 days (8/11/98)	DCS implemented its own EPSDT tracking system for children in DCS custody on July 1, 1998.
96	Monitoring and Reporting Compliance	120 days (7/11/98)	A reporting process has been developed by the TennCare Bureau Office.
97	Data on Provider Encounters		This system is in existence at TennCare.
98	Ongoing Audits of Encounter Data		<p>The contract between the Bureau of TennCare and the managed care organizations (MCOs) specifies that "Individual encounter/claim data shall be reported in a standardized format as specified by TennCare and transmitted electronically to the TennCare agency on a basis specified by TennCare. The minimum data elements required to be provided are identified in Attachment II, Exhibit E of this Agreement."</p> <p>The Bureau of TennCare monitors submission of encounter data on an ongoing basis and takes action in the form of a withhold of 10% of the monthly capitation payment whenever it is determined that a contractor is not in compliance. Monthly retention of the withhold amount continues for each subsequent month so long as the identified deficiency has not been corrected. Any amounts withheld by TennCare for six consecutive months for the same compliance deficiency are retained permanently by TennCare. Information on the amounts withheld from each MCO/BHO due to encounter data reporting problems since the inception of the TennCare program is available upon request.</p>

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			<p>TennCare staff have worked extensively with each MCO comparing summary statistics collected and self-reported by the MCO from claims data with summary statistics generated by TennCare from encounter data submitted by the MCO. Much time and effort has been spent identifying the reasons for any discrepancies between these two data sources and implementing corrective action to assure the accuracy of encounter data. We are now very satisfied that the TennCare MCO encounter database is complete and accurate, and we are beginning to generate MCO specific information concerning service delivery. The process described above is ongoing for the BHOs.</p> <p>Several reports have been issued presenting MCO specific service delivery information. The "MCO Preventive Services and Ambulatory Care Report " allows for an MCO by MCO comparison of well child screening rates, child dental visit rates, pap smear and mammography screening rates and rates of hospitalization for ambulatory care sensitive conditions. Other encounter data-based reports have analyzed emergency room utilization, prevalence and treatment of ADHD, pediatric asthma ER visits and hospitalization rates, and hospitalization rates among diabetics. Each of these reports has provided MCO and region specific information. These reports serve an important data validation function. MCOs are required to submit corrective action plans if their performance in a particular area is unacceptable. In order to develop an appropriate corrective action plan, the MCO must first determine whether the apparent poor performance is due to a data reporting problem or a true service delivery problem. The Bureau then monitors the implementation of the corrective action plan and progress can be tracked through annual repetition of the encounter data-based studies.</p> <p>Encounter data validation is a high priority and ongoing activity within the TennCare Bureau. Another data validation activity involved an extremely large perinatal study in</p>

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			<p>which approximately 25,000 TennCare births were identified from a linked TennCare enrollment - birth certificate file. Encounter data was then analyzed to determine if the birth had been reported to the TennCare Bureau. Overall, approximately 95% of births were accurately reported through the encounter data system.</p> <p>In addition to the activities described above, TennCare builds a data validation component into any medical record review which is conducted to assess a quality of care issue. Given our commitment to ongoing quality of care studies, we envision that our future activities in the area of data validation will continue to be linked with these endeavors. As a result, staff intensive activities such as linking existing data systems and medical record review can serve multiple quality assurance functions.</p>
99	Selection of Contractor to Conduct Services Testing on a Sample of Plaintiff Class Members	Select contractor within 60 days execute contract within 120 days	<p>TennCare has selected two contractors to carry out this project. East Tennessee State University (ETSU) has been chosen to conduct an analysis of a random sample of the entire TennCare population of children and adolescents, and the University of Tennessee at Memphis is conducting an analysis of a cohort of 400 children who have been labeled Seriously Emotionally Disturbed, as well as 400 Severely and/or Persistently Mentally Ill adults. Contracts with both groups have been finalized. The total amount of the ETSU contract is \$454,650, which includes in-kind contributions from ETSU. The total amount of the UT-Memphis contract for a three year period is \$1,301,618, which includes in-kind contributions from UT-Memphis.</p> <p>These are being developed as needed.</p>
100	Policy Clarifications and Guidelines		
101	Review of Appeals	Every six months, beginning on 7/11/98	<p>The Appeals Unit is responsible for identifying those appeals where there appear to be EPSDT violations and forwarding information on them to TennCare for assessment of liquidated damages as appropriate. The overall report on appeals for the period from July-December 1998 revealed that there were 360 appeals recorded by the Appeals Unit, which is a rate of less than 7 per 10,000 child enrollees. The care types with the highest</p>

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102-103	Review of Provider Contracts	60 days (5/11/98)	number of appeals were residential treatment (72), pharmacy (58), dental (39), and mental health outpatient treatment (33).  The Tennessee Department of Commerce and Insurance (TDCl) has completed its review of MCO and BHO contracts, as well as DCS contracts. The Contract Development and Compliance Unit at TennCare analyzed TDCI's review and prepared feedback for the MCOs, BHOs, and DCS. A total of 265 contracts were reviewed. Of this total, 162, or 61%, were found to contain language that might potentially encourage violations of the EPSDT mandate. Each MCO and BHO was notified in writing of the findings of the review and was given until September 25, 1998, to formulate a detailed corrective action plan for revising the deficient contracts. Nine of the 11 contractors completed the required corrective action plan within the specified time period. The two remaining contractors submitted either late or insufficient reports, and appropriate penalty actions have been taken to insure their subsequent compliance. All new or revised provider agreements will be monitored by the Office of Contract Development and Compliance to assure that they contain no components which would discourage compliance with EPSDT.
104	Semiannual Reports	7/31 and 1/31 of each year	The State filed the first Semiannual Report on July 31, 1998. A second report will be filed at the end of January 1999.
106	Quarterly Meetings with Plaintiffs' Attorneys		To date, meetings have been occurring more frequently than quarterly.
107	Attorneys' Fees	60 days (5/11/98)	Plaintiffs' attorneys' fees of \$98,663 were authorized for payment by the Attorney General's Office as of August 25. Of this amount, \$92,152 was paid to the Tennessee Justice Center, \$4,635 was paid to the National Health Law Program, and \$1,876 was paid to the Bazelon Center for Mental Health.
113	Notification of Class		After review by the plaintiffs' attorneys, a MCO newsletter notice was sent to all MCOs

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Section Number	Topic	Deadline	Progress
114	Members  Notification of Persons with Disabilities		on April 13, 1998. After review by the plaintiffs' attorneys, a description of the settlement was sent to the hotlines and the MCOs on May 11, 1998. TennCare has sent letters containing the description of the settlement mentioned above to well over 200 advocacy organizations for distribution to their members and constituents. The description has also been circulated to providers in the State's Immunization Program.
115	Attachment of Information in Newly Approved TennCare Eligibles' Notice of Eligibility		An announcement has been prepared and is in the process of being added to the "new member" letters sent out by TennCare.

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## **Attachment E**

# **Proposed Hearing and Vision Screening Guidelines**

# Recommendations of the TennCare EPSDT Screening Guidelines Committee

## Hearing and Vision Screenings

### January 1999

	Recommendations for Hearing Screening		Recommendations for Vision Screening	
	<i>Subjective</i>	<i>Objective</i>	<i>Subjective</i>	<i>Objective</i>
Newborn	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> <li>• Family history</li> <li>• Wakes to loud noises</li> <li>• Head turning with voice/noise</li> </ul>	<ul style="list-style-type: none"> <li>• ABR or OAE, if performed in hospital</li> <li>• Observational screening with noisemaker (optional)</li> </ul>		<ul style="list-style-type: none"> <li>• Eye exam: red reflex, corneal inspection</li> </ul>
2-4 days	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> <li>• Family history</li> <li>• Responses to voice and noise—parent report</li> </ul>	<ul style="list-style-type: none"> <li>• ABR or OAE, if performed in hospital</li> <li>• Observational screening with noisemaker (optional)</li> </ul>		<ul style="list-style-type: none"> <li>• Eye exam: red reflex, corneal inspection</li> </ul>
By 1 month	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> <li>• Family history (if less previously recorded)</li> <li>• Response to voice and noise—parent report</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam: red reflex, corneal inspection</li> <li>• Fixes on face, follows with eyes</li> </ul>
2 months	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> <li>• Family history (unless previously recorded)</li> <li>• Response to voice and noise—parent report</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam: red reflex, corneal inspection</li> <li>• Fixes on face, follows with eyes</li> </ul>
3 months	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Observational screening</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Fixes and follows each eye</li> </ul>

Recommendations for Hearing Screening			Recommendations for Vision Screening	
	<i>Subjective</i>	<i>Objective</i>	<i>Subjective</i>	<i>Objective</i>
	<ul style="list-style-type: none"> <li>Family history (unless previously recorded)</li> <li>Response to voice and noise—parent report</li> </ul>	with noisemaker (optional)		
4 months	<ul style="list-style-type: none"> <li>Parental perception of hearing</li> <li>Recognizes parent's voice—parent report</li> <li>Family history (unless previously recorded)</li> </ul>	<ul style="list-style-type: none"> <li>Ear exam</li> <li>Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>Eye exam</li> <li>Fixes and follows each eye</li> </ul>
6 months	<ul style="list-style-type: none"> <li>Parental perception of hearing</li> <li>Turns to sounds—parental report</li> <li>Family history (unless previously recorded)</li> </ul>	<ul style="list-style-type: none"> <li>Ear exam</li> <li>Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>Eye exam</li> <li>Fixes and follows each eye</li> </ul>
9 months	<ul style="list-style-type: none"> <li>Parental perception of hearing</li> <li>Response to voice and noise—parent report</li> <li>Family history (unless previously recorded)</li> </ul>	<ul style="list-style-type: none"> <li>Ear exam</li> <li>Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>Eye exam</li> <li>Fixes and follows each eye</li> </ul>
12 months	<ul style="list-style-type: none"> <li>Parental perception of hearing</li> <li>Response to voice and noise—parent report</li> <li>Family history (unless otherwise recorded)</li> </ul>	<ul style="list-style-type: none"> <li>Ear exam</li> <li>Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>Eye exam</li> <li>Fixes and follows each eye</li> </ul>
15 months	<ul style="list-style-type: none"> <li>Parental perception of hearing</li> <li>Response to voice and noise—parent report</li> <li>Family history (unless otherwise recorded)</li> </ul>	<ul style="list-style-type: none"> <li>Ear exam</li> <li>Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>Parental perception of vision</li> <li>Can see small objects</li> </ul>	<ul style="list-style-type: none"> <li>Eye exam</li> <li>Can see small objects</li> </ul>

	Recommendations for Hearing Screening		Recommendations for Vision Screening	
	<i>Subjective</i>	<i>Objective</i>	<i>Subjective</i>	<i>Objective</i>
	previously recorded)			
18 months	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> <li>• Response to voice and noise—parent report</li> <li>• Family history (or less previously recorded)</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> <li>• Can see small objects</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Can see small objects</li> </ul>
24 months	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> <li>• Response to voice and noise—parent report</li> <li>• Family history (or less previously recorded)</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> <li>• Can see small objects</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Can see small objects</li> </ul>
3 years	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Hearing screen (optional)</li> <li>• Observational screening with noisemaker (optional)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> <li>• Can see small objects</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Ocular alignment, visual acuity (optional)</li> <li>• Can see small objects</li> </ul>
4 years	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Hearing screen (if not done at 3 years)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Ocular alignment, visual acuity (if not done at 3 years)</li> </ul>
5 years	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Hearing screen (if not done at 3 or 4 years)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Ocular alignment, visual acuity (if not done at 3 or 4 years)</li> </ul>
6 years	<ul style="list-style-type: none"> <li>• Parental perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Hearing screen (if not done at 3, 4, or 5 years)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Ocular alignment, visual acuity (if not done at 3, 4, or 5 years)</li> </ul>
7 years	<ul style="list-style-type: none"> <li>• Parental and patient perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Hearing screen</li> </ul>	<ul style="list-style-type: none"> <li>• Parental and patient perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> </ul>
8 years	<ul style="list-style-type: none"> <li>• Parental and patient perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Hearing screen (if not done</li> </ul>	<ul style="list-style-type: none"> <li>• Parental and patient perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> </ul>

Recommendations for Hearing Screening			Recommendations for Vision Screening	
	Subjective	Objective	Subjective	Objective
		at 7 years)		
9 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 7 or 8 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li></ul>
10 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 7, 8, or 9 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity</li></ul>
11 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 7, 8, 9, or 10 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity (if not done at 10 years)</li></ul>
12 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 7, 8, 9, 10, or 11 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity (if not done at 10 or 11 years)</li></ul>
13 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 7, 8, 9, 10, 11, or 12 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity (if not done at 10, 11, or 12 years)</li></ul>
14 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity</li></ul>
15 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 14 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity (if not done at 14 years)</li></ul>
16 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 14 or 15 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity (if not done at 14 or 15 years)</li></ul>
17 years	<ul style="list-style-type: none"><li>Parental and patient perception of hearing</li></ul>	<ul style="list-style-type: none"><li>Ear exam</li><li>Hearing screen (if not done at 14, 15, or 16 years)</li></ul>	<ul style="list-style-type: none"><li>Parental and patient perception of vision</li></ul>	<ul style="list-style-type: none"><li>Eye exam</li><li>Visual acuity (if not done at 14, 15, or 16 years)</li></ul>

	Recommendations for Hearing Screening		Recommendations for Vision Screening	
	<i>Subjective</i>	<i>Objective</i>	<i>Subjective</i>	<i>Objective</i>
18 years	<ul style="list-style-type: none"> <li>• Parental and patient perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> <li>• Hearing screen (if not done at 14, 15, 16, or 17 years)</li> </ul>	<ul style="list-style-type: none"> <li>• Parental and patient perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> <li>• Visual acuity (if not done at 14, 15, 16, or 17 years)</li> </ul>
19 years	<ul style="list-style-type: none"> <li>• Parental and patient perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> </ul>	<ul style="list-style-type: none"> <li>• Parental and patient perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> </ul>
20 years	<ul style="list-style-type: none"> <li>• Parental and patient perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> </ul>	<ul style="list-style-type: none"> <li>• Parental and patient perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> </ul>
21 years	<ul style="list-style-type: none"> <li>• Parental and patient perception of hearing</li> </ul>	<ul style="list-style-type: none"> <li>• Ear exam</li> </ul>	<ul style="list-style-type: none"> <li>• Parental and patient perception of vision</li> </ul>	<ul style="list-style-type: none"> <li>• Eye exam</li> </ul>

#### HEARING SCREENING

- Newborn hearing screenings are most likely to occur in hospital with results reported to the primary care provider. Acceptable methods of screening include auditory brainstem response (ABR) and click acoustic emissions (OAE) with thresholds of 30 dB HL.
- Newborn hearing screening is recommended for all newborn infants. As of January 1999, not all hospitals in the State have the capability of conducting newborn hearing screening. Newborn hearing screenings should be provided for all newborns by the year 2003.
- Recommended testing intervals: The committee recommends an objective hearing screening test once in each of the following age ranges: 3-6, 10-13, 14-18. Screening should be conducted at the first visit during the above listed intervals at which the patient is cooperative.
- Acceptable methods of objective hearing screening include: conventional audiometry, hand-held audiometry, conditioned play audiometry (with a screening level of 20 dB HL at 500, 1000, 2000, and 4000 Hz).
- Positive screening results should lead to referral for diagnostic assessment of hearing. A prompt re-screening may be substituted for immediate referral for diagnostic assessment if the clinician believes the initial screening result is likely to be a false positive. Re-screening should be done within 2-4 weeks rather than waiting until the next scheduled well child visit.

#### VISION SCREENING

- Recommended testing intervals:
  - The committee recommends testing ocular alignment and visual acuity once in the 3-6 year old age range. These procedures should be conducted at the first visit during which the patient is cooperative.
  - The committee recommends testing visual acuity once in each of the following age ranges: 10-13, 14-18.

- Acceptable methods for screening ocular alignment include: photoscreening (preferred), unilateral cover test at 10 feet or 3 M, Random Dot E Stereotest at 40 cm (630 secs of arc).
- Acceptable methods for screening visual acuity include: Snellen Letters, Snellen Numbers, Tumbling F, HOTV, Picture Tests, Allen Figures, LH Tests.
- Positive screening results should lead to referral for diagnostic assessment of vision. A prompt re-screening may be substituted for immediate referral for diagnostic assessment if the clinician believes his initial screening result is likely to be a false positive. Re-screening should be done within 2-4 weeks rather than waiting until the next scheduled well child visit.

## **Attachment F**

# **Statewide List of Services with which EPSDT Coordination is Appropriate**



STATE OF TENNESSEE  
DEPARTMENT OF HEALTH  
BUREAU OF TENNCARE  
729 CHURCH STREET  
NASHVILLE, TENNESSEE 37247-6501

MEMORANDUM

TO: MCO and BHO Executive Directors

FROM: Wendy Long, M.D., M.P.H. *WL*  
Acting Director

SUBJECT: Statewide list of services for which EPSDT coordination is appropriate

DATE: September 22, 1998

Attached please find a list of services available around the State for which EPSDT coordination is appropriate. This list was prepared by Dena Crim Bost in the Policy Unit in order to comply with Paragraph 79 of the EPSDT Consent Decree.

We will be updating this list on a regular basis and would appreciate any comments or suggestions you might have. Please refer your comments and suggestions to Dena. You can call her at 615-253-1757 or write to her at the above address.

**Statewide List of Services for  
Which EPSDT Coordination is  
Appropriate**

**September 1998  
Bureau of TennCare  
Tennessee Department of Health**

# Contents

- Health Department Services
- School Services for Children with Special Needs
- Head Start Programs
- Mental Health Services
- Mental Retardation and Developmental Disability Services
- Vocational Rehabilitation Services
- Alcohol and Drug Abuse Services
- Services Offered by the Department of Children's Services
- Services Offered by the Tennessee Commission on Children and Youth

# **Health Department Services**

**GENERAL EPSDT SERVICES PROVIDED  
BY LOCAL HEALTH DEPARTMENTS:**

**Child Health:** Well child checkups including physical examinations, screening tests and immunizations for children from birth to age 21. Referrals are made when necessary.

**Immunizations:** Various immunizations are available for children including: polio, diphtheria, whooping cough, tetanus, measles, mumps, rubella, hemophilus, and hepatitis B.

**Primary Care:** Primary Care services are available in some local health departments. Clinic staff are available to diagnose and treat acute and chronic illnesses and provide diagnostic testing, such as blood pressure screening and pap smears.

**Family Planning:** Patients can receive a complete physical examination and all appropriate laboratory tests. Education is provided about birth control and patients may be supplied with a birth control method.

**Sexually Transmitted Disease Control:** Confidential testing, treatment and partner notification is provided for sexually transmitted diseases, including HIV/AIDS.

**Tuberculosis Control:** Diagnosis, treatment, medication (when needed) and follow-up services for patients with tuberculosis and their contacts are provided.

✓ **Nutrition and Women, Infants and Children (WIC):** Nutritionists and/or registered dietitians are available to counsel individuals with specific dietary needs. The WIC program issues vouchers for nutritious foods to women who are pregnant or breast feeding, as well as children under the age of 5 who are at risk of poor growth, if the families meet income guidelines. New mothers are also offered breastfeeding classes and support.

**Children's Special Services (CSS):** The CSS program assists with medical treatment for children until age 21, when the child has special medical needs and the family is unable to provide for necessary care. Speech and hearing services may also be provided under this program.

**Prenatal:** Pregnancy testing, presumptive eligibility screening for Medicaid/TennCare, and referral for prenatal care are available.

**DEFINITIONS OF SERVICES PROVIDED BY HEALTH DEPARTMENTS  
AS LISTED ON FOLLOWING CHARTS:**

**Child Health and Development Program** (CHAD) is provided in 40 Tennessee counties, with target populations of pregnant women and children from birth to 6 years of age. Program goals are to prevent or reduce abuse, neglect, and developmental delays. Case Management Services are provided for the family and most visits are conducted in the home.

**Clinical Dental** indicates that the health department provides basic (diagnostic, preventive and restorative) dental care for indigent children, and emergency dental services (limited to diagnosis and treatment of an acute episode of pain, infection, swelling, hemorrhage or trauma) for indigent adults. Number of days listed on chart indicates how many days per week these services are provided.

**Project HUG** (Help Us Grow) is a program targeting families whose infants are considered to be at risk for medical or developmental problems. Home visits are made by a public health nurse, beginning during the prenatal period. Teen mothers and infants are given highest priority.

**Full Prenatal** indicates that the health department provides comprehensive prenatal care in accordance with ACOG standards. Number of days listed on chart indicates how many days per week these services are provided.

**Basic Prenatal** indicates that the health department performs pregnancy tests, enrolls the patient in WIC and signs the patient up for TennCare via presumptive eligibility. Number of days listed on chart indicates how many days per week these services are provided.

**Primary Care PCP** indicates that the health department has signed with MCO(s) to act as the primary care provider, providing 24-hour care and arranging referrals for these patients. The number of patients currently assigned to the respective health departments is listed. Number of days listed on chart indicates how many days per week these services are provided.

**Primary Care Basic** indicates that the health department is providing some acute care such as treatment for pharyngitis, otitis media, etc., but is not acting as the patient's PCP and does not provide 24-hour coverage. Number of days listed on chart indicates how many days per week these services are provided.

COUNTY	CHAD	CLINICAL DETIAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE	
					Full	Basic	PCP	Basic
Carter	x	2 days		x		x		
Greene	x	5 days		x		x		4.5 days
Hancock	x		x	x		x		
Hawkins	x	3 days	x	x		x		5 days
Johnson	x	2 days		x		x		
Unicoi	x	2 days		x		x		
Washington	x	5 days		x		x		5 days

**NORTHEAST TENNESSEE**

COUNTY	CHAD	CLINICAL DENTAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE PCP	PRIMARY CARE Basic
					Full	Basic		
Anderson	x	4 days		x	x	x		5 days
Blount	x			x		x		
Campbell	x	1 day		x		x		
Claiborne	x			x		x		
Cocke	x	1 day		x		x		
Grainger	x			x		x		
Hamblen	x			x		x		
Jefferson	x			x		x		
Loudon	x			x		x		
Monroe	x	4 days		x		x		
Morgan	x			x		x		
Roane	x			x		x		
Scott	x			x		x		
Sevier	x			x		x		
Union	x			x		x		

**EAST TENNESSEE**

COUNTY	CHAD	CLINICAL DENTAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE PCP	PRIMARY CARE Basic
					Full	Basic		
Bledsoe		potential for 20 hrs. week no provider		x		x		
Bradley		3 days	x	x	0.5 days	x		5 days
Franklin				x		x		
Grundy				x		x		
McMinn		5 days		x		x		2 days
Marion		2.5 days		x		x		
Meigs				x		x		
Polk				x		x		
Rhea		potential for 20 hrs. week no provider		x		x		
Sequatchie				x		x		

**SOUTHEAST TENNESSEE**

COUNTY	CHAD	CLINICAL DENTAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE	PRIMARY CARE
					Full	Basic		
Cannon	x			x		x		0.5 days
Clay	x			x		x	15 patients	5 days
Cumberland	x	3 days		x		x	1577 patients	5 days
Dekalb	x	2 days		x		x		0.5 days
Fentress	x			x		x		0.5 days
Jackson	x	1 day		x		x	14 patients	5 days
Macon	x	1 day		x		x	40 patients	4 days
Overton	x			x		x		1.5 days
Pickett	x	2 days		x		x		0.5 day
Putnam	x	5 days		x		x	1250 patients	5 days
Van Buren	x	1 day		x		x		0.5 day
Warren	x	3 days		x		x		1 day
White	x	1.5 days		x		x		0.5 day

## UPPER CUMBERLAND

COUNTY	CHAD	CLINICAL DENTAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE PCP	PRIMARY CARE Basic
					Full	Basic		
Cheatham				x		x		
Dickson		3 days		x	x		755	
Houston				x		x		
Humphreys				x		x		
Montgomery				x		x	961	
Robertson				x		x		
Rutherford		6 days		x	x		612	
Stewart				x		x	477	
Sumner		6 days		x		x	858	
Trousdale				x		x		
Williamson				x		x	1021	
Wilson				x		x	430	

**MID-CUMBERLAND**

COUNTY	CHAD	CLINICAL DENTAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE	PRIMARY CARE
					Full	Basic		
Bedford				x	x		578	Basic
Coffee				x		x		
Giles				x		x	539	
Hickman				x		x		
Lawrence				x		x		
Lewis				x		x		
Lincoln				x		x		
Marshall				x		x		
Maury				x		x	925	
Moore				x		x	152	
Perry				x		x		
Wayne				x		x		

SOUTH CENTRAL

COUNTY	CHAD	CLINICAL DENTAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE	PRIMARY CARE
					Full	Basic		
Benton						x		Basic
Cannell				x		x		
Chester	x					x		
Crockett				x	x			
Decatur	x				x			
Dyer			x			x		
Fayette		4 days		x	x			5 days
Gibson		5 days		x	x			
Hardeman	x	4 days			x			
Hardin				x		x		
Haywood		4 days		x		x		
Henderson	x				x			
Henry			x			x		
Lake	x		x			x		
Lauderdale		4 days		x		x		
McNairy				x		x		
Obion				x	x			
Tipton		4 days		x		x		
Weakley						x		

WEST TENNESSEE

REGIONAL OFFICE CLINICS	TB	CSS	HIV	COLPOSCOPY	OTHER SERVICES
Northwest Tennessee	x	x		x (Washington Co. HD)	a) High-risk NICU Follow-up b) Monthly clinics for Perinatal Center
East Tennessee	x	x		x	
Southeast Tennessee	x	x			
Upper Cumberland	x	x	x	x (Dr. Ware)	Vanderbilt Hospital Genetics Program
Mid Cumberland	x	x		x (Rutherford & Dickson Co.)	
South Central	x	x	x	x	Genetics
West Tennessee	x	x	x		Resource Mothers (available in Decatur, Fayette, Hardeman, Henderson, Lauderdale and Chester Counties)

## REGIONAL OFFICE CLINICS

COUNTY	CLINICAL DENTAL	HOME HEALTH	HUG	PRENATAL CARE		PRIMARY CARE	PRIMARY CARE
				Full	Basic		
Davidson	5 days		x		x		5 days
Hamilton	5 days		x	x		950 patients	5 days
Knox	5 days		x	x	x	2000 (pediatric) patients	5 days
Madison	3 days		x	x			
Shelby	3 days	x	x			22,100 patients	x
Sullivan			x		x		5 days

**METROPOLITAN CLINICS  
LIST A**

COUNTY	SPECIALTY CLINICS				OTHER SERVICES
	CSS	TB	HIV	COLOSCOPY	
Davidson	x	x			Renal Intervention Program Home and Community Based Program Overseas Immunizations (5 days) Immigration Physicals (2 days) 3300 indigent served 600 patients rec'd Rx services in Health Dept. International Travel Immunizations CHAD Lead Screening Program
Hamilton	x	x	x		
Knox	x	x (case mgmt. only)	x (in primary care clinics)	x  (referral for indigents)	
Madison					
Shelby	x	x	x		
Sullivan	x	x	x	x	

**METROPOLITAN AREA**  
**SPECIAL CLINICS**  
**LIST B**

# **School Services for Children with Special Needs**

## **ADDITIONAL EPSDT SERVICES PROVIDED BY STATE AGENCIES:**

### **Tennessee Department of Education:**

#### ***Services for the blind:***

A residential school serving legally blind and multi-handicapped children, ages 3 through 21:

Tennessee School for the Blind  
115 Stewart's Ferry Pike  
Nashville, TN 37214

615/231-7300

#### ***Services for the hearing impaired:***

A residential school serving hearing impaired and multi-handicapped children, ages 3 through 21:

Tennessee School for the Deaf  
P.O. Box 886  
Knoxville, TN 37901

423/577-7581

A residential and day school serving elementary students, ages 3 through 13, who are deaf or hearing impaired:

West Tennessee School for the Deaf  
100 Berryhill Drive  
Jackson, TN

901/423-5705

#### ***Special Education Programs:***

State law mandates that free and appropriate educational services be provided to all children with disabilities, including children who are intellectually gifted, developmentally delayed and functionally delayed. Special Education programs are available in all 95 counties, through local school systems. Special Education programs must be provided as an alternative when the educational objectives cannot be met in the regular school program. Each school system must include a goal of providing full educational opportunity to all children with disabilities, ages birth to 21, also including detailed timelines for accomplishing these goals. Special Education services also include "related services", i.e., transportation and other such developmental, corrective and supportive services as required to assist an eligible child to benefit fully from special education. These "related services" also include, but are not limited to: audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities in children, counseling services, medical services for diagnostic or evaluation purposes, school health services, social work services in schools and parent counseling and training.

# **Head Start Programs**

**Head Start Programs:**

Project Head Start was created to prepare low-income preschoolers for grade school. The original intent of the program was to serve three and four-year old children and their families, with income at or below federal poverty level income levels. The program's intent is to teach children the skills that they will need to succeed in school. In some areas, children are served from birth through the third grade. This is an important program, because it reaches out to children at a young age. It helps children learn to socialize and develop their cognitive abilities. If developmental difficulties are present at these ages, prompt intervention may take place, so that corrective measures can be taken.

Head Start Agencies include:

**Specially Funded Agencies:**

Knoxville-Knox County Head Start  
2400 Piedmont Street  
Knoxville, TN 37914

423/522-2193

City of Chattanooga Head Start/Parent Child Center Program  
2302 Ocoee Street, Avondale Center  
Chattanooga, TN 37406

423/493-9750

Northwest Tennessee Head Start  
526 West Walnut  
McKenzie, TN 38201

901/352-7951

**Cluster Agencies:**

Anderson County Head Start  
135 East Broad Street  
Clinton, TN 37716

423/457-5500

CAS/Morgan County Head Start  
P.O. Box 179  
Wartburg, TN 37887

423/346-6633

Clinch-Powell Educational Cooperative Head Start  
P.O. Box 279  
Tazewell, TN 37879

423/587-4500

Douglas-Cherokee Head Start  
534 East 1<sup>st</sup> North Street  
Morristown, TN 37816

423/587-4500

Mountain Valley E.O.A. Head Start  
P.O. Drawer 397  
Tazewell, TN 37879

423/626-5192

Upper East Tennessee H.D.A. H.S.  
301 Louis Street  
Kingsport, TN 37662

423/246-6180

Cordell Hull E.O.C. Head Start  
501 College Street  
Lafayette, TN 37083 423/666-4542

L.B.J. & C. Developmental Corporation H.S.  
400 Crawford Avenue  
Monterey, TN 38574 931/839-2235

Family Resource Agency, Inc., Head Start  
485 Second Street, SE  
Cleveland, TN 37311 423/479-4210

Mid-East CAA Head Start  
P.O. Box 43  
Rockwood, TN 37854 423/354-0450

Sequatchie Valley Planning and Development Head Start  
P.O. Box 769  
South Pittsburg, TN 37380 423/447-2459

South Central HRA Head Start  
606 Lee Avenue  
Fayetteville, TN 37334 931/433-7182

Caney Fork Development Corporation Head Start  
203 West Main  
McMinnville, TN 37110 931/473-4015

Mid-Cumberland Head Start  
Wal-Mart Plaza Bldg., Suite 211  
Smyrna, TN 37167 615/459-4118

Clarksville/Montgomery County Head Start  
1221 Highway Drive  
Clarksville, TN 37040 423/648-2785

Highland Rim Head Start  
P.O. Box 208  
Erin, TN 37061 423/289-4135

Shelby County Community Services Agency Head Start  
1100 North Mid-American Mall, Suite 1100  
Memphis, TN 38103 901/576-4600

Metropolitan Action Commission H.S.  
1624 5<sup>th</sup> Avenue North  
Nashville, TN 37208 615/862-8860

Southwest Head Start  
Highway 45 North  
Henderson, TN 38340

901/989-5111

Delegate Agencies:

Oak Ridge Schools Preschool  
304 New York Avenue  
Oak Ridge, TN 37831

423/482-6326

Johnson County Head Start  
211 North Church Street  
Mountain City, TN 37683

423/727-9381

Carter County B.O.E.  
Academy Street  
Elizabethton, TN 37643

423/543-3591

# Mental Health Services

**Tennessee Department of Mental Health and Mental Retardation:**

***Mental Health Institutions:***

The Division of Mental Health Services (DMHS) serves severely and persistently mentally ill (SPMI) adults, as well as seriously emotionally disturbed (SED) children and adolescents. The staff carry out the business responsibilities of the division which includes: legislative, forensic and children's issues; planning, evaluation and data analysis; interstate and inter-facility transfers; service development, advocacy and education; training; Pre-Admission Screening and Annual Resident Review (PASARR); and the administration of federal funds allocated for mental health services. DMHS oversees and monitors the five regional mental health institutes (RMHIs) which provides inpatient psychiatric services to seriously mentally ill persons needing such services. By combining the standards and requirements of the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO), Medicaid/Medicare, and the U.S. Department of Justice, the DMHS has developed a set of standards to monitor the RMHIs for quality. All RMHIs are fully accredited by the JCAHO and have been since 1978.

Regional Mental Health Institutes:

Lakeshore Mental Health Institute  
4908 Lyons View Pike  
Knoxville, TN 37919

423/450-5200

Memphis Mental Health Institute  
865 Poplar Avenue  
Memphis, TN 38174

901/524-1200, ext. 201

Middle Tennessee Mental Health Institute  
221 Stewart's Ferry Pike  
Nashville, TN 37214

615/902-7535

Moccasin Bend Mental Health Institute  
Moccasin Bend Road  
Chattanooga, TN 37405

423/785-3400

Western Mental Health Institute  
Highway 64 West  
Bolivar, TN 38074

901/658-5141, ext. 280

**Community Mental Health Centers:**

A special feature of the TennCare Partners Program is the emphasis on community support services that are offered primarily through Community Mental Health Agencies and Case Management Agencies. Tennessee is moving away from the "institutional" model of delivering mental health care toward a more normalized model. Support services are now offered to individuals to help them remain in their homes and communities. The particular configuration of services that they receive will be planned and delivered in such a way as to produce reductions in their unwanted symptoms and improvements in their overall quality of life.

Services offered by these community providers include: outpatient mental health services; pharmacy and laboratory services; outpatient substance abuse services; crisis services and transportation. Additional services for people with Severe and/or Persistent Mental Illness (SPMI) or Serious Emotional Disturbance (SED) include mental health case management, residential treatment services, housing supports, psychosocial rehabilitation, and specialized outpatient services.

**Tennessee Community Mental Health Centers:**

Carey Counseling Center  
408 Virginia Street  
Paris, TN 38242 901/642-0521

Centerstone Community Mental Health Centers  
1101 6<sup>th</sup> Avenue North  
Nashville, TN 37204 615/480-4000

Cherokee Health Systems  
6350 West Andrew Johnson Highway  
Talbott, TN 37877 423/586-5031

Cumberland Mental Health Services  
1404 Winter Drive  
Lebanon, TN 37037 615/444-4500

Elam Mental Health Center  
1005 D.B. Todd Boulevard  
Nashville, TN 37208 615/327-6609

Fortwood Center  
1028 East 3<sup>rd</sup> Street  
Chattanooga, TN 37403 423/266-6751

Frayser Family Counseling Center  
2150 Whitney Avenue  
Memphis, TN 38127 901/353-5440

Frontier Health 109 West Watauga Avenue Johnson City, TN 37605	423/232-4323
Helen Ross McNabb Canter 1520 Cherokee Trail Knoxville, TN 37920	423/637-9711
Midtown Mental Health Center 427 Linden Avenue Memphis, TN 38128	901/577-9450
Overlook Center 3001 Lake Brook Boulevard Knoxville, TN 37909	423/588-9938
Professional Counseling Services 1997 Highway 51 South Covington, TN 38019	901/476-8967
Quinco Community Mental Health Center Route 1, Box 500, Highway 64 West Bolivar, TN 38008	901/658-6113
Ridgeview Psychiatric Hospital and Center 240 West Tyrone Road Oak Ridge, TN 37830	423/482-1076
Southwest Mental Health Center 3810 Winchester Road Memphis, TN 38181	901/369-1420
The Guidance Center 118 North Church Street Murfreesboro, TN 37133	615/893-0770
Vanderbilt Community Mental Health Center Vanderbilt University Medical Center Department of Psychiatry 2100 Pierce, Suite 118 Nashville, TN 37232	615/343-7123
Volunteer Behavioral Health Care System Moccasin Bend Road Chattanooga, TN 37405	423/756-0755
Whitehaven-Southwest Mental Health Center 1087 Alice Avenue Memphis, TN 38106	901/774-7911

# **Mental Retardation and Developmental Disability Services**

***Mental Retardation and Developmental Disabilities Centers:***

**Regional Mental Health and Mental Retardation Offices:**

Community based services are provided by private, not-for-profit and for-profit agencies that contract with the State. Programs are designed to help people maximize their potential in the most integrated setting possible. Services include adult day training, vocational programs, supported employment, community participation, early intervention services for preschoolers, residential and supported living services, family support services, and a variety of support services.

Three regional offices coordinate services for persons with mental retardation:

East Tennessee Regional Office  
5908 Lyons View Pike, Greenbriar Cottage  
Knoxville, TN 37919 423/588-0508

Middle Tennessee Regional Office  
275 Stewart's Ferry Pike  
Nashville, TN 37214 615/231-5078

West Tennessee Regional Office  
275 Martin Luther King Drive  
Jackson, TN 38301 901/426-0675  
(Memphis #: 901/685-3918)

**Developmental Disabilities Centers:**

Three state-operated developmental centers provide residential care for persons who have profound or severe mental retardation, usually with multiple handicaps. Individuals residing in developmental centers require 24-hour care in a highly supervised setting.

There are three state-operated developmental centers in Tennessee:

Arlington Developmental Center  
P.O. Box 586  
Arlington, TN 38002 901/745-7200

Clover Bottom Developmental Center  
275 Stewart's Ferry Pike  
Nashville, TN 37214 615/231-5000

Greene Valley Developmental Center  
P.O. Box 910  
Greeneville, TN 37744 423/787-6800



STATE OF TENNESSEE  
DEPARTMENT OF FINANCE AND ADMINISTRATION  
CORDELL HULL BUILDING, 5<sup>TH</sup> FLOOR  
425 FIFTH AVENUE, NORTH  
NASHVILLE, TENNESSEE 37243

## MENTAL RETARDATION COMMUNITY SERVICES CONTRACTED AGENCIES

### TYPES OF SERVICES PROVIDED

AD	Adult Day Services
DD	Developmental Disabilities
D & E	Diagnosis and Evaluation
EI	Early Intervention Services
EI-H	Early Intervention Services- Part H
FS	Family Support
ISC	Independent Support Coordination
MW	Medicaid Waiver
MWAD	Medicaid Waiver Adult Day Program
MWRES	Medicaid Waiver Residential Program
RC	Respite Care
RESA	Community Residential Program for Adults
RESC	Community Residential Program for Children
SL	Supported Living
SS	Supportive Services
ST	Statewide

This is not a complete listing of providers of services to persons with mental retardation in Tennessee. This list includes only those agencies with which the Tennessee Department of Mental Health and Mental Retardation contracts for services.

September 10, 1998

**EAST TENNESSEE****FUNDED SERVICES**

Adult Community Training, Inc.  
P.O. Box 276  
Lenoir City, Tennessee 37771  
Phone: (423) 988-9494  
Director: Bill Reynolds  
Chairperson: Dr. Walter Shea

Fax: (423) 986-1137  
E-Mail: Int.adult3@conc.tds.net

AD  
MWAD  
MWRES  
RESA  
SL

Arm's Reach  
821 East Tri County Boulevard  
Suite E  
Oliver Springs, Tennessee 37840  
Phone: (423) 435-9385  
Director: Jean Loebbaka  
President: Jane Durbin

Fax: (423) 435-9387

ISC

Arc of Claiborne County  
(Cumberland Mountain Industries)  
P. O. Box 538  
Tazewell, Tennessee 37879  
Phone: (423) 626-6757  
Director: Scott Ferguson  
Chairperson: Darrell Allen

Fax: (423) 626-1088

AD  
EI-H  
FS  
MWAD  
MWRES

Arc of Hamilton County  
109 North Germantown Road  
Chattanooga, Tennessee 37411  
Phone: (423) 624-6887  
Director: Mike Brewer  
Chairperson: Richard E. Burke

Fax: (423) 698-8520

ISC  
RC

Arc of Washington County  
2700 South Roan Street, Suite 105  
Johnson City, Tennessee 37604  
Phone: (423) 928-9362  
Director: Bill Schiers  
Chairperson: Mary Jordan

Fax: (423) 928-7431

FS  
EI-H  
ISC  
RC  
SC

Beta Home  
1809 Luttrell Street  
P. O. Box 185  
Knoxville, Tennessee 37901-0185  
Phone: (423) 523-2135 or 523-7683 Fax: (423) 673-5863  
Director: Jennifer Beatty  
Chairperson: Mark Medley

MWRES  
RESA

Bradley/Cleveland Developmental Services, Inc.  
P. O. Box 29  
Cleveland, Tennessee 37364  
Phone: (423) 472-5268 or 479-8704 Fax: (423) 472-5268, ext. 47  
Director: Walter Hunt  
Chairperson: Dr. Raymond Brown

AD  
MWAD  
MWRES  
RESA  
SL

**EAST TENNESSEE****FUNDED SERVICES**

Carter County Community Residence  
 802 Sixth Street  
 Elizabethton, Tennessee 37643  
 Phone: (423) 542-3649 or 753-8255 Fax: (423) 753-7062  
 Director: Pat Little Williams  
 Chairperson: Sam LaPorte

RESA  
 MWRES

Cerebral Palsy Center for Handicapped Adults, Inc.  
 241 Woodland Avenue, NE  
 Knoxville, Tennessee 37917  
 Phone: (423) 523-0491 Fax: (423) 523-0492  
 Director: Robert (Bob) Sexton  
 Chairperson: Steve Early

AD  
 FS  
 MWAD  
 MWRES  
 SL

Comcare, Inc.  
 P.O. Box 1885 (705 West Main, Zip: 37743)  
 Greeneville, Tennessee 37744-1885  
 Phone: (423) 638-3926 Fax: (423) 638-1105  
 Director: John Johnson, Ph. D.  
 Chairperson: Lynn Hankins

AD  
 MWAD  
 MWRES  
 SS  
 SL

Community Network Services  
 109 Northshore Drive, Suite 215  
 Knoxville, Tennessee 37919  
 Phone: (423) 588-3449 Fax: (423) 588-3644  
 Director: Donna Harris  
 Chairperson: John Harris

ISC

Comprehensive Family Services (CFS)  
 7514 Sutton Road  
 Ooltewah, Tennessee 37363  
 Phone: (423) 344-1586 Fax: (423) 344-5525  
 Director: James L. Stubbs  
 Chairperson: Michael Cox

AD  
 MWRES

Dawn of Hope Developmental Center, Inc.  
 1500 East Millard Street  
 Johnson City, Tennessee 37601-3545  
 Phone: (423) 434-5600 Fax: (423) 434-5629  
 Director: Lee Chase  
 Chairperson: Jack Shaver

AD  
 MWAD  
 MWRES

Douglas Cooperative  
 1101 Wagner Drive  
 Sevierville, Tennessee 37862-3719  
 Phone: (423) 453-3254 Fax: (423) 453-3105  
 Director: Paula York  
 Chairperson: John Richardson

AD  
 EI  
 MWAD  
 MWRES  
 RESA

**EAST TENNESSEE****FUNDED SERVICES**

Emory Valley Center, Inc.  
 715 Emory Valley Road  
 Oak Ridge, Tennessee 37830  
 Phone: (423) 483-4386  
 Director: Allen Hendry  
 Chairperson: Susan Fallon

Fax: (423) 482-5435

AD  
 EI  
 FS  
 MWAD  
 MWRES  
 RESA  
 SL

Evergreen Presbyterian Ministries, Inc.  
 P.O. Box 31746  
 Knoxville, TN 37930-1746  
 Phone: (423) 531-9118  
 Acting Director: Mary Mills  
 Chairperson: Curtis Lackey  
 President/CEO: Bernard Wagner, Ph.D.

Fax: (423) 531-9149

MWAD  
 RESA

Exceptional Enterprises, Inc.  
 HCR 77 Box 9  
 Coalmont, Tennessee 37313  
 Phone: (931) 692-2235  
 Director: Bill Lingle  
 Chairperson: Mr. Henry Crais

Fax: (931) 692-2244

AD  
 MWAD  
 MWRES  
 SL

Frontier Health  
 109 W. Watauga Avenue  
 P. O. Box 2226  
 Johnson City, Tennessee 37605  
 Phone: (423) 232-4380  
 Director: E. Douglas Vamey  
 Chairperson: Helen Whitson

Fax: (423) 232-4393

AD  
 EI-H  
 FS  
 MWAD  
 MWRES  
 RESA  
 SL

Gateway House, Inc.  
 Rt. #1, Holston College Road  
 P. O. Box 220  
 Louisville, Tennessee 37777  
 Phone: (423) 984-9873  
 Director: Dianna Culbertson  
 Chairperson: Dr. Roberta Werner

Fax: (423) 984-9873

RESC

Goodwill Industries  
 5508 Kingston Pike  
 P. O. Box 11066  
 Knoxville, Tennessee 37939-1066  
 Phone: (423) 588-8567  
 Director: Robert Rosenbaum, Ed.D.  
 Chairperson: Hugh Bright

Fax: (423) 588-0075

AD

Greene County Skills, Inc.  
 490 Sunnyside Road  
 Greeneville, Tennessee 37743  
 Phone: (423) 639-5351  
 Director: Jim Gillen  
 Chairperson: Harold Love

Fax: (423) 639-6048

AD  
 FS  
 MWAD  
 MWRES  
 SL

**EAST TENNESSEE****FUNDED SERVICES**

Grundy County Department of Education

P. O. Box 97, Highway 108/56

Altamont, Tennessee 37301

Phone: (615) 692-3467

Fax: (615) 692-2188

Director: Jennifer Thomas

Chairperson: Leon Woodlee

EI

Chip Hale Center (Helping Hands of Hawkins Co.)

310 Hasson Street

Rogersville, Tennessee 37857

Phone: (423) 272-3966

Fax: (423) 272-4025

Director: Tony Cradic

Chairperson: Joe Drinnon

AD  
MWAD

Independent Opportunities of Tennessee

9040 Executive Park Drive, Suite 244

Knoxville, Tennessee 37933

Phone: (423) 531-9155

Fax: (423) 531-9149

Director: Melissa Morelli

Chairperson:

AD

Knox County Association for Retarded Citizens

P. O. Box 2041, 3000 North Central

Knoxville, Tennessee 37901

Phone: (423) 546-9431

Fax: (423) 546-7960

Director: Vicki Johnson, Ph.D.

Chairperson: Fred Jones

AD  
DD  
EI  
SL

Lakeway Center, Inc.

320 Industrial Avenue

Morristown, Tennessee 37813

Phone: (423) 586-0701

Fax: (423) 586-9958

Director: Bruce Ingle

Chairperson: Charles R. Metz

AD  
MWAD  
MWRES  
RESA

Laughlin Hospital, Inc. (Infant/Toddler Intervention Project)

1420 Tusculum Boulevard

Greeneville, Tennessee 37745

Phone: (423) 787-5097

Fax: (423) 787-5083

Director: Noah Roark

Chairperson: C. Ray Adams, CPA

EI

Little Tennessee Valley Educational Cooperative

1432 East Lee Highway

Loudon, Tennessee 37774

Phone: (423) 458-8900

Fax: (423) 458-8626

Director: Jerome (Jerry) H. Morton, Ph.D.

Chairperson: Mary Hendershot

EI  
EI-H

**EAST TENNESSEE****FUNDED SERVICES**

Michael Dunn Center  
 P. O. Box 507, Rt. #3, Gallaher Road  
 Kingston, Tennessee 37763  
 Phone: (423) 376-3416 Fax: (423) 376-3532  
 Director: Kyle Hauth E-Mail: Int.khauth@hotmail.com  
 Chairperson: Dr. Clyde Cobb, President

AD  
 EI  
 MWAD  
 MWRES  
 RESA  
 SL

Morristown/Hamblen Day Care Centers, Inc.  
 P. O. Box 1936  
 Morristown, Tennessee 37816-1936  
 Phone: (423) 587-3001 Fax: (423) 587-6779  
 Director: Judy Brasher  
 Chairperson: Jim Wills

EI

National Mentor Healthcare, Inc.  
 dba Tennessee Mentor  
 6025 Brookvale Lane, Suite 110  
 Knoxville, TN 37919  
 Phone: (423) 584-1388 Fax: (423) 584-3313  
 Director: David Hamilton  
 Chairperson: Gregory Torres, President

MWRES

Omni Vision (*Serving East, Middle and West Tennessee*)  
 Omni Community Services  
 101 Lea Avenue  
 Nashville, TN 37210  
 Phone: (615) 726-3603 Fax: (615) 726-0393  
 Director: Julia Bratcher (MHMR Services)  
 Chairperson: Charles McLeroy

MWRES

Orange Grove Center  
 615 Derby Street  
 P.O. Box 3249  
 Chattanooga, Tennessee 37404-0249  
 Phone: (423) 629-1451 Fax: (423) 624-1294  
 Director: Mike Cook  
 Chairperson: Thomas H. Cox

AD  
 MWAD  
 MWRES  
 RESA  
 SL

Rebound, Inc.  
 3111 Ramona Avenue  
 Knoxville, Tennessee 37921  
 Phone: (423) 633-5900 Fax: (423) 633-5900 (call first)  
 Director: Jim Warchol

MWAD

Regional Education and Community Health Services (REACHS)  
 507 Main Street  
 P. O. Box 209  
 Jacksboro, Tennessee 37757-0209  
 Phone: (423) 562-1156 Fax: (423) 566-5106  
 Director: Cindy Nance  
 Chairperson: William R. Pratt

AD  
 MWAD  
 MWRES

**EAST TENNESSEE****FUNDED SERVICES**

Rhea of Sunshine, Inc.  
 400 Greenway Blvd.  
 Dayton, Tennessee 37321-9249  
 Phone: (423) 775-4855 Fax: (423) 775-4083  
 Director: Terry Wilkey  
 Chairperson: Mary Travis

AD  
 MWAD  
 MWRES

Scott Appalachian Industries, Inc.  
 591 East Montecello Pike  
 Huntsville, Tennessee 37756  
 Phone: (423) 663-2878 Fax: (423) 663-3365  
 Director: Larry West  
 Chairperson: Martin Shoemaker

AD  
 SL

Sertoma Center, Inc.  
 1400 East Fifth Avenue  
 Knoxville, Tennessee 37917  
 Phone: (423) 524-5555 Fax: (423) 524-5563  
 Acting Director: Sandy Cooper  
 Chairperson: Sarah Swanson Higgins

AD  
 DD  
 MWAD  
 MWRESA  
 RESA  
 RESC  
 SL

Signal Centers, Inc.  
 109 North Germantown Road  
 Chattanooga, Tennessee 37411-2790  
 Phone: (423) 698-8528 Fax: (423) 698-8520  
 Director: Linda McReynolds  
 Chairperson: Joe Schmissrauter, III

AD  
 EI  
 EI-H

Siskin Memorial Foundation, Inc.  
 1 Siskin Plaza, P.O. Box 365  
 Chattanooga, Tennessee 37401-0365  
 Phone: (423) 634-1760 Fax: (423) 634-1717  
 Director: Shawn Kurrelmeier  
 Chairperson: Tom Kale

EI

Sunrise United Cerebral Palsy of East TN  
 9050 Executive Park Drive  
 Suite C-115  
 Knoxville, Tennessee 37923  
 Phone: (423) 690-9070 Fax: (423) 690-6221  
 Director: Yolanda Pena  
 Chairperson: Les W. Leech, Jr.

MWRES

T.A.P., Inc. (The Alternative Program, Inc.)  
 207 National Drive, Apt. 97  
 Murfreesboro, Tennessee 37128  
 Phone: (615) 907-0305 Fax: (615) 907-0306  
 Director: Scot Booth  
 Director of Operations: Kim Hancock  
 Chairperson: John Schukle

ISC

**EAST TENNESSEE****FUNDED SERVICES**

T.E.A.M. (Community Connections)  
 The Professional & Developmental Team Building  
 600 North Holtzclaw Avenue, Suite 100  
 Chattanooga, Tennessee 37404-1220  
 Phone: (423) 622-0500 Fax: (423) 622-0564  
 Director: Carol Burhenn  
 Chairperson: Dale Engstrom

ISC

Team Evaluation Center  
 The Professional & Developmental Team Building  
 600 North Holtzclaw Avenue, Suite 100  
 Chattanooga, Tennessee 37404-1220  
 Phone: (423) 622-0500 Fax: (423) 622-0564  
 Director: Alan Bullard  
 Chairperson: Father James Marquis

D & E  
 FS  
 SS

Tennessee Mentor (see National Mentor Healthcare, Inc.)

Tri-County Center  
 3030 Lee Highway, Northridge Industrial Park  
 P. O. Box 793  
 Athens, Tennessee 37371-0793  
 Phone: (423) 745-8902 Fax: (423) 745-2840  
 Interim Director: Lena Webb  
 Chairperson: Robert (Bob) James Granger

AD  
 MWAD  
 MWRES  
 RESA  
 SL

U. T. Developmental & Genetic Center  
 1930 Alcoa Hwy., Suite 435  
 Knoxville, Tennessee 37920-1514  
 Phone: (423) 544-9030 Fax: (423) 544-6675  
 Director: Dr. Carmen Lozzio  
 ISC Contact: Mr. Bill Shelton  
 Chairperson:

DD  
 D&E  
 ISC  
 EI

U. T. Pediatric Language Clinic  
 909 Mountcastle Drive  
 Knoxville, Tennessee 37996  
 Phone: (423) 974-6702 Fax: (423) 974-1539  
 Director: Pat H. Webb, M.Ed.  
 Chairperson:

EI  
 EI-P

Vision Coordination Services, Inc.  
 515 Airport Road, Suite 113  
 Chattanooga, TN 37421  
 Phone: (901) 637-5348 Fax:  
 Director: Cedric Deadmon  
 Office Contacts: Becky Roberts, pager - (423) 819-0365  
 Nicole Breard, pager - (423) 819-0529

ISC

**EAST TENNESSEE**

Washington County Community Residential Services, Inc.  
802 Buffalo Street, Suite 8  
Johnson City, Tennessee 37604  
Phone: (423) 928-2752 Fax: (423) 928-3680  
Director: Ron Bennett  
Chairperson: Janie H. Snyder

**FUNDED SERVICES**

AD  
MWRES  
RESA  
SL

**MIDDLE TENNESSEE****FUNDED SERVICES**

Arc of Davidson County  
 1207-17th Avenue South, Suite 100  
 Nashville, Tennessee 37212  
 Phone: (615) 321-5699  
 Director: Norm Tenenbaum  
 Chairperson: Elise McMillan

Fax: (615) 322-9184

FS  
 ISC  
 MWRES  
 RC  
 SL  
 SS

Arc of Williamson County  
 1320 West Main, Suite 114  
 Franklin, Tennessee 37064

Phone: (615) 790-5815

Fax: (615) 790-5815

Director: Sharon Bottorff  
 Chairperson: Dara Howe

FS  
 ISC

Buffalo River Services, Inc.  
 P. O. Box 847, Hog Creek Rd.  
 Waynesboro, Tennessee 38485

Phone: (931) 722-5401

Fax: (931) 722-5403

Director: Philip Gamer  
 Chairperson: Tom Helton

AD  
 FS  
 MWAD  
 RESA  
 SL

Building Greater Communities, Inc. (BGC)

2813 Dogwood Place

Nashville, Tennessee 37204

Phone: (615) 385-1365

Fax: (615) 385-1250

Director: Cynthia Eason  
 Chairperson: Marie LaVesque

ISC

Challengers, Inc.

409 East Central Avenue

P. O. Box 941

Jamestown, Tennessee 38556

Phone: (931) 879-7590

Fax: (931) 879-1843

Director: Ken Taylor  
 Chairperson: Timothy P. Nelson

AD  
 DD  
 SL

Community Development Center

111 Eaglette Way

Shelbyville, Tennessee 37160

Phone: (615) 684-8681

Fax: (615) 684-9431

Director: Sarah Hunt  
 Chairperson: Charles L. Rich

EI  
 EI-H  
 FS  
 ISC

Community Living Supports of Tennessee

1503 Hatcher Lane, Suite 100

Columbia, Tennessee 38401

Phone: (931) 840-8719

Fax: (931) 840-8756

Director: Steve Jacobs  
 Chairperson: Sharon A. H. May, President

AD  
 MWAD  
 RC  
 SL

**MIDDLE TENNESSEE****FUNDED SERVICES**

Community Support Services, Inc.  
 1100 Kermit Drive, Suite 022  
 Nashville, Tennessee 37217  
 Phone: (615) 366-1125  
 Director: Debbie Riddle  
 Chairperson: Bryce Coatney

Fax: (615) 366-0524

MWAD  
 MWRES  
 RESC  
 SL

COMPASS Coordination, Inc.  
 2403 12th Avenue South  
 Nashville, Tennessee 37204  
 Phone: (615) 463-2880  
 Director: Randall Moore  
 Chairperson: Randall Moore

E-Mail: Int:compassmtn@aol.com  
 Fax: (615) 463-2824

ISC

DDM  
 3107 Park Hill Road  
 Murfreesboro, TN 37129  
 District Manager: Jim Copeland  
 Phone: (615) 898-8387

MWAD  
 SL

Developmental Services of Dickson County  
 P.O. Box 628  
 Dickson, Tennessee 37056  
 Phone: (615) 446-3111  
 Director: Don Redden  
 Chairperson: Julian Norman

Fax: (615) 446-1846  
 E-Mail: Int.dsdrv@isdn.net

AD  
 EI  
 FS  
 MWAD  
 MWRES  
 RESA  
 SL

Easter Seal Society of Tennessee  
 2001 Woodmont Boulevard  
 Nashville, Tennessee 37215  
 Phone: (615) 292-6640  
 Director: Jayne Perkins, President  
 Chairperson: Samuel H. Howard

E-Mail: Int:generalseals@mindspring.com  
 Fax: (615) 292-7206

AD  
 MWAD

First Steps, Inc.  
 4414 Granny White Pike  
 Nashville, Tennessee 37204  
 Phone: (615) 298-5619  
 Director: Pamela Pallas  
 Chairperson: Jacqueline Dixon

Fax: (615) 292-4941

EI

Franklin County Adult Activity Center, Inc.  
 P.O. Bpx 708  
 702 Hundred Oaks Street  
 Winchester, Tennessee 37398-0708  
 Phone: (931) 967-1377 or 967-0100  
 Director: Deborah Rains  
 Chairperson: C. Jackson Davis

Fax: (931) 962-1483

AD  
 MWAD  
 MWRES  
 RESA  
 SL

**MIDDLE TENNESSEE****FUNDED SERVICES**

Goodwill Industries of Middle Tennessee

905-9th Avenue North

Nashville, Tennessee 37208

Phone: (615) 742-4151

Fax: (615) 254-3901

President: David Lifsey

Chairperson: John Van Mol

AD  
MWAD

Habilitation and Training Services

545 Airport Rd.

P. O. Box 1856

Gallatin, Tennessee 37066

Phone: (615) 451-0974

Fax: (615) 451-0774

Nashville Line: 244-5528

Director: John McIntosh

Chairperson: Max Head

AD  
EI  
FS  
MWAD  
MWRES  
RESA  
SL

Hilltoppers, Inc.

151 Sweeney Drive

Crossville, Tennessee 38555-6068

Phone: (931) 484-2535

Fax: (931) 484-8778

Director: Stephen (Tony) Cox

Chairperson: Leonard Robertson

AD  
MWAD  
MWRES  
RESA  
SL

Homeplace

1901 20th Avenue South

P.O. Box 120966

Nashville, Tennessee 37212

Phone: (615) 292-8705

Fax: (615) 320-9197

Director:

Chairperson: Marcie Smeck-Bryant

Residential Coordinator: Lyn West (Send all mail to her)

MWRES

Impact Centers, Inc.

1209 Tradewinds Drive

Columbia, Tennessee 38401

Phone: (931) 381-2114

Fax: (931) 381-8389

Director: George Riggall

Chairperson: William Lindsey

AD  
MWAD  
MWRES  
RESA  
RESC  
SL

Independence Systems, Inc.(formerly Lawrence County Skills)

2300 W. O. Smith St.

P. O. Box 743

Lawrenceburg, Tennessee 38464

Phone: (931) 762-5066

Fax: (931) 766-2059

Director: Ray Farris

Chairperson: John Lancaster

AD  
MWAD  
RESA

**MIDDLE TENNESSEE****FUNDED SERVICES**

James Developmental Center  
200 Matthew S. Hollow Road  
P. O. Box 605

Waverly, Tennessee 37185

Phone: (931) 296-7755

Fax: (931) 296-7033

Director: Ruby James

Chairperson: Carolyn Ashbury

AD  
EI  
MWAD  
MWRES  
RESA  
SL

K.C. Home of Clarksville (Wesley Housing Corporation)

2425 41-A By-Pass

Clarksville, Tennessee 37040

Phone: (615) 553-0177

Fax: (615) 553-0177 (call before faxing)

Director: Brett Buehrer

Chairperson: Grady Welker

Contact Person: Brian Harris, Residential Coordinator

448 Hannings Lane

Martin, Tennessee 38237

Phone: (901) 587-6324

MWRES

Kids, Inc.

50 Dayton Avenue

Crossville, Tennessee 38555

Phone: (931) 484-8306

Fax: (931) 456-5389

Director: Ronnie Webb

Chairperson: Jean Bell

EI

King's Daughters' School

412 West 9th Street

Columbia, Tennessee 38401

Phone: (931) 388-3810

Fax: (931) 388-0405

Director: Charlotte Battles

Chairperson: Randy Maxwell

EI  
EI-H

Life Action of Tennessee, Inc.

2131 Murfreesboro Road, L-1

Nashville, Tennessee 37217

Phone: (615) 399-3891

Fax: (615) 399-0020

Director: Paul Medlin

SL

Luton Mental Health Services

1921 Ransom Place

Nashville, TN 37217

Phone: (615) 366-1801

Fax: (615) 366-1866

Director: Dr. Robert N. Vero

Chairperson: Randall Yearwood

MWAD

**MIDDLE TENNESSEE****FUNDED SERVICES**

Middle Tennessee State University  
Project HELP

EI

P. O. Box 413, 206 N. Baird Lane  
Murfreesboro, Tennessee 37132

Phone: (615) 898-2321

Fax: (615) 898-5538

Director: Ann Campbell

Chairperson: Duane Stucky, Vice President  
Finance & Administration

Mid-TN Supported Living, Inc.  
1161 Murfreesboro Road  
Suite 215

SL

Nashville, Tennessee 37217

Phone: (615) 367-0592

Fax: (615) 399-8407

Director: Denine C. Hunt

Chairperson: Doria Parvini

Nashville Senior Citizens Center  
1801 Broadway

SS

Nashville, Tennessee 37203

Phone: (615) 327-4551

Fax: (615) 327-4554

Director: Janet Jernigan

Chairperson: Mary Herbert Kelly

New Horizons Corporation  
5221 Harding Place

AD

Nashville, Tennessee 37217-2901

MWAD

Phone: (615) 360-8595

Fax: (615) 360-3515

MWRES

Director: John Redditt

RESA

Chairperson: Joe A. Carson

SL

NIA Properties, Inc.

SE

P.O. Box 30123

SL

Clarksville, TN 37040

Phone: (931) 358-0306

Fax: (931) 358-3081

Director: Carol Stevens

Omni Vision

MWRES

101 Lea Drive

Nashville, Tennessee 37210

Phone: (615) 726-3603

Fax: (615) 726-0393

Director: Julia Bratcher (MHMR Services)

Chairperson: Charles McLeroy

Other Options, Inc.

AD

Building III

SL

11350 McCormick Road, Suite 700

Hunt Valley, Maryland 21031

Phone: (410) 527-9990

Fax: (410) 527-9998

Director: Jesse Grimm

Attn: Susan Hann

Chairperson:

**MIDDLE TENNESSEE****FUNDED SERVICES**

Outlook Nashville  
 3004 Tuggle Avenue  
 Nashville, Tennessee 37211-2522  
 Phone: (615) 834-7570 Fax: (615) 834-5565  
 Director:  
 Chairperson: Mike Clark

AD  
 DD  
 EI  
 MWAD  
 MWRES  
 SL

Pacesetters, Inc.  
 421 Universal Drive  
 P. O. Box 2731  
 Cookeville, Tennessee 38502-2731  
 Phone: (931) 432-6960; 432-6961 Fax: (931) 432-6890  
 Director: Wendy Moreland  
 Chairperson: Buckie D. Parsons, D.D.S.

AD  
 FS  
 MWAD  
 MWRES  
 RESA

Pediatric Services of America/Kids Medical Club  
 (formerly Kids and Nurses of Nashville, Inc.)  
 2001 Charlotte Avenue, Suite 100  
 Nashville, Tennessee 37203  
 Phone: (615) 321-5299 Fax: (615) 321-5181  
 Director: Darla Bagwell

SS

Progress, Inc.  
 480 Craighead St., Suite 201  
 P. O. Box 41005  
 Nashville, Tennessee 37204  
 Phone: (615) 297-3344, ext. 13 Fax: (615) 297-5312  
 Director: Richard Preslor  
 Chairperson: Bob Parker

AD  
 FS  
 MWAD  
 MWRES  
 RC  
 RESA  
 SL  
 SS

Progressive Directions  
 1249 Paradise Hill Road  
 Clarksville, Tennessee 37040  
 Phone: (931) 647-6333 Fax: (931) 552-3541  
 Director: Jay Albertia  
 Chairperson: Steve Korfledge

AD  
 EI  
 EI-H  
 FS  
 MWAD  
 MWRES  
 RESA

Prospect, Inc.  
 1301 Winter Dr.  
 P. O. Box 1184  
 Lebanon, Tennessee 37087  
 Phone: (615) 444-0597 Fax: (615) 444-1251  
 Director: Eric Thompson  
 Chairperson: Jim Flood

AD  
 EI  
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 RESA

**MIDDLE TENNESSEE****FUNDED SERVICES**

R & D Instructional Services  
 501 Metroplex Drive  
 Suite 207  
 Nashville, TN 37211-3131  
 Phone: (615) 837-4446  
 Director: Bob Jorgenson  
 Chairperson:

Fax:

SE

REM - Tennessee  
 107 Music City Circle, Suite 106  
 Nashville, TN 37214  
 Phone: (615) 883-5500  
 Director: Linda Sullivan  
 Chairperson:

Fax: (615) 883-5504

MWAD  
 SL

Res-Care, Inc.  
 P.O. Box 186  
 723 S. Main Street  
 Springfield, TN 37172  
 Phone: (615) 345-0266  
 Director: Amy Grisby  
 Chairperson: Theresa Sumrell

Fax: (615) 384-2364

MWRES

Residential Services, Inc.  
 1451 Elm Hill Pike, #161  
 Nashville, Tennessee 37210  
 Phone: (615) 367-4333  
 Director: Charles McLeroy  
 Chairperson: Jack Seaman

Fax: (615) 360-3894

RESC

Rochelle Training and Habilitation Center  
 1020 Southside Court  
 Nashville, Tennessee 37203  
 Phone: (615) 254-0673  
 Director: Harry Gramann  
 Chairperson: Charles M. Ingram

Fax: (615) 726-2837

AD  
 MWAD

Rutherford County Adult Activity Center  
 P.O. Box 733, 1130 Haley Road  
 Murfreesboro, Tennessee 37130  
 Phone: (615) 890-4389  
 Director: Betty McNeely  
 Chairperson: Horace C. Beasley

Fax: (615) 849-8727

E-Mail: Int.rcaac@bellsouth.net

AD  
 MWAD  
 MWRES  
 RESA  
 SL

Senior Services  
 392 Harding Place, Suite 203  
 Nashville, Tennessee 37211-3999  
 Phone: (615) 837-0700  
 Director: Gail Currie  
 Chairperson:

Fax: (615) 837-1037

AD  
 MWAD  
 MWRES  
 RESA

**MIDDLE TENNESSEE****FUNDED SERVICES**

Skills Development Services  
 P. O. Box 1150, 704 South Washington Street  
 Tullahoma, Tennessee 37388  
 Phone: (931) 455-5107 Fax: (931) 455-3372  
 Director: Tom Norman  
 Chairperson: Brenda C. Hurd

AD  
 EI  
 MWAD  
 MWRES  
 RESA

Stones River Center  
 3350 Memorial Boulevard  
 Murfreesboro, Tennessee 37160  
 Phone: (615) 895-7788 Fax: (615) 895-6999  
 Director: Shelly McDonald  
 Chairperson:

AD  
 MWAD  
 RESA

Sunny Brook Home, Inc.  
 2131 Long Distance Road  
 Lewisburg, Tennessee 37091  
 Phone: (931) 359-3814 Fax: (931) 359-3814  
 Director: Johnny Brown  
 Chairperson: Rev. Larry Helton

RESA

Sunrise Community of Tennessee, Inc.  
 1410 Donelson Pike  
 Suite A-20  
 Nashville, Tennessee 37217  
 Phone: (615) 366-7535 Fax: (615) 366-7428  
 Director: Tina Veale  
 Chairperson: Leslie W. Leech, Jr.

SL

Susan Gray School for Children  
 Vanderbilt University  
 Peabody Campus  
 P.O. Box 66  
 Nashville, Tennessee 37203  
 Phone: (615) 322-8200 Fax: (615) 322-8236  
 Director:  
 Chairperson: Ann Marie Deer Owens

EI

Tennessee Mentor, Inc.  
 214 Centerview Drive  
 Suite 265  
 Brentwood, Tennessee 37027  
 Phone: (615) 376-6333 Fax: (615) 376-6039  
 Director: Michael Hamlet  
 Chairperson:

SL  
 MWRES

Tennessee Technological University  
 P. O. Box 5037  
 Cookeville, Tennessee 38501  
 Phone: (615) 372-3555 Fax: (615) 372-3898  
 Director: Eloise Jackson, Ph.D.  
 Chairperson: Angelo A. Volpe (615) 372-3374

EI-H

**MIDDLE TENNESSEE**

Vanderbilt University - Child Development Center  
 ATTN: *Pat Cherry, Admin. Secretary*  
 2100 Pierce Avenue, Room 426  
 Nashville, Tennessee 37232-3573  
 Phone: (615) 936-0249 Fax: (615) 936-0256  
 Director: Mark Wolraich, M. D.  
 Assoc. Dir: Angie Thompson, Med. Ctr. South  
 Chairperson: William Cook

VOCA Corporation  
 Tennessee Regional Office  
 211 Donelson Pike, Suite 11  
 Nashville, Tennessee 37214  
 Phone: (615) 874-0011 Fax: (615) 874-0511  
 Director: Heidi Parworth  
 Chairperson: (Hdqt: Dublin, OH)

Volunteers of America TN  
 500 Interstate Boulevard, Suite 101  
 Nashville, Tennessee 37210  
 Phone: (615) 256-6884 Fax: (615) 256-6255  
 Director: Beverly Collins  
 Chairperson: Charles Fulner

Waves, Inc.  
 P.O. Box 1225  
 Franklin, Tennessee 37065-1225  
 Phone: (615) 794-7955 Fax: (615) 794-6019  
 Exec. Director: Jennifer Krahenbill  
 Chairperson: Tom Stearns

**FUNDED SERVICES**

D &amp; E

RESA

MWAD  
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MWAD  
MWRES  
RESA  
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**WEST TENNESSEE****FUNDED SERVICES**

C. S. Patterson Training and Habilitation Center, Inc.  
1284 Highway 45 By-Pass N.  
P. O. Box 229

Trenton, Tennessee 38382

Phone: (901) 855-2316

Director: Harry Adcock

Chairperson: R. L. Radford

Fax: (901) 855-3608

E-Mail: Int:haexptc@iswt.com

AD  
EI  
EI-H  
FS  
MWAD  
MWRES  
RESA  
SL

Carroll County Developmental Center  
13345 Paris Street

Huntingdon, Tennessee 38344-2523

Phone: (901) 986-8914

Director: Barbara Gray

Chairperson: Dr. Laddie Lollar

Fax: (901) 986-5469

E-Mail: Int:ccdc@iswt.com

AD  
FS  
MWAD  
MWRES  
RESA  
SL

Children and Family Services, Inc.

412 Alston Avenue

P. O. Box 845

Covington, Tennessee 38019-0845

Phone: (901) 476-2364

Director: Minnie Bommer

Chairperson: Barbara Grandberry

Fax: (901) 476-2368

EI

Community Developmental Services, Inc.

455 Hannings Lane

Martin, Tennessee 38237-3390

Phone: (901) 587-3851

Director: Cathy Cate

Chairperson: Jim Wheatley

Fax: (901) 587-0548

E-Mail: Int:cdsrsvs@pluto.utm.edu

AD  
FS  
MWAD  
MWRES  
RESA  
SL

(Specify to whom you are sending information.)

COMPASS Coordination, Inc.

(Serving Middle & West Tennessee)

3251 Poplar Avenue, Suite 230

Memphis, TN 38111-3603

Phone: (901) 327-1040

Director: Randall Moore

Chairperson: Randall Moore

Fax: (901) 327-1141

E-Mail: Int:compasscor@aol.com

ISC

Cornerstone (formerly Benton County Developmental Services)

207 Hwy. 641 North

P.O. Box 486

Camden, Tennessee 38320

Phone: (901) 584-2002

Director: Ricky Allen

Chairperson: Bill Kee

Fax: (901) 584-8645

AD  
FS  
MWAD  
MWRES  
SL

**WEST TENNESSEE****FUNDED SERVICES**

Developmental Disabilities Dental Clinic  
34 Garland Drive

Jackson, Tennessee 38305

Phone: (901) 668-3573

Fax: (901) 668-3583

Director: Diane Britt

Chairperson: Dr. O. Chester Jones

SS

Down Syndrome Association of Memphis, Inc.  
Special Kids & Families, Inc.

P.O. Box 22383

Memphis, Tennessee 38122

Phone: (901) 324-7050

Fax: (901) 324-1285

Director: JoAnn Hinkle

Chairperson: Catherine Clippard, President

EI

EI-H

Dungarvin, Inc. of TN  
6061 Stage Road, Suite 3

Memphis, TN 38134

Phone: (901) 382-6515

E-Mail: Int:jsmrt@aol.com

Fax: (901) 392-9032

Director: Judy Smrt

Chairperson: Tim Madden

MWAD

MWRES

Easter Seal Developmental Services  
99 Monroe Avenue

Lexington, Tennessee 38351

Phone: (901) 968-6037

Fax: (901) 967-1512

Director: Judy Bowman

Chairperson: Samuel H. Howard

AD

FS

MWAD

MWRES

SL

Fayette County Development Center, Inc.  
P. O. Box 339

Somerville, Tennessee 38068

Phone: (901) 465-3364

E-Mail: Int:fayyum@juno.com

Fax: (901) 465-5193

Director: Shirley Lee

Chairperson: Cliff Henderson, Jr.

AD

MWAD

Hardeman County Developmental Services Center, Inc.  
208 Hope Street

Bolivar, Tennessee 38008

Phone: (901) 658-4403

Fax: (901) 658-3280

Director: Thomas Addcox

Chairperson: Hazel Bills

AD

EI

MWAD

MWRES

RESA

Hardin County Skills  
1821 Northwood Drive

P. O. Box 666

Savannah, Tennessee 38372

Phone: (901) 925-4039

Fax: (901) 925-5679

Director: Anna Robinson

Chairperson: Brent Grimes

MWAD

MWRES

**WEST TENNESSEE****FUNDED SERVICES**

Harwood Training Center, Inc.  
711 Jefferson Avenue

EI-H

Memphis, Tennessee 38105

Phone: (901) 448-6580

Fax: (901) 448-4734

Director: Anne Wieties

Chairperson: William E. Loveless

Helen R. Tucker Adult Developmental Center

P.O. Box 648

Ripley, Tennessee 38063

Phone: (901) 635-4290

Fax: (901) 635-8975

Director: Clayton Pattat

Chairperson: Helen Tucker

AD  
FS  
MWAD  
RESA

Kiwanis Center for Child Development, Inc.

32 Garland Drive

Jackson, Tennessee 38305

Phone: (901) 668-9070

Fax: (901) 668-6549

Director: Dale Brittain

Chairperson: Bill Taylor

EI  
EI-H

Le Bonheur Children's Medical Center

50 North Dunlap Street (March 1998)

Memphis, Tennessee 38103

Phone: (901) 572-67347

Fax: (901) 572-5261

VP of Operations: Janice Marks

Chairperson: Ronald Walter

EI

Madison/Haywood Developmental Services Center

P.O. Box 11205

Jackson, Tennessee 38308-0120 E-Mail: Int:mhdsjackson51@hotmail.com

Phone: (901) 664-0855 (213 Cheyenne Drive, Jackson, TN 38305)

Phone: (901) 664-5857 (38 Garland Drive)

Fax: (901) 668-2973

Director: Bob Ellis

Chairperson: Paula Butler

AD  
FS  
MWAD  
MWRES  
RESA

McNairy County Developmental Services

393 South Sixth Street

Selmer, Tennessee 38375

Phone: (901) 645-7730

Fax: (901) 645-9118

Director: Quinnie Bell

Chairperson: S. Craig Kennedy

AD  
MWAD  
MWRES  
RESA  
SL

Mid-South Association for Retarded Citizens

3485 Poplar Avenue, Suite 225

Memphis, Tennessee 38111

Phone: (901) 327-2473

Fax: (901) 327-2687

Director: Carlene Leaper

Chairperson: Connie Booker

RC

**WEST TENNESSEE****FUNDED SERVICES**

Omni Vision, Inc.  
 101 Lea Avenue  
 Nashville, Tennessee 37210  
 Phone: (615) 726-3603 Fax: (615) 726-0393  
 Exec. Director: James M. Henry  
 Director: Julia Bratcher (MHMR Services)  
 Chairperson: Charles McLeroy

**MWRES**

Other Options, Inc.  
 250 North Parkway, Suite 26  
 Jackson, Tennessee 38305  
 Phone: (901) 664-5767 Fax: (901) 664-7473  
 Director: Caterina Pangilinan  
 Chairperson:

**SL**

Porter Leath Children's Center  
 868 North Manassas  
 Memphis, Tennessee 38107  
 Phone: (901) 577-2500 E-Mail: Int:janew@porter-leath.com  
 Director: David Hansen Fax: (901) 577-2506  
 Chairperson: Ms. Shanne Porter

**SS**

QUEST of Tennessee  
 P.O. Box 1300  
 Apopka, FL 32704  
 Phone: (407) 889-4530 Fax: (407) 889-5710  
 Director: Alan Fidelo  
 Chairperson: Katie Porta

**RESA  
RESC**

R&D  
 250 N. Parkway, Suite 26  
 Jackson, TN 38305  
 Phone: (901) 664-5767 Fax: (901) 664-7473  
 Director: David Bell

**SE**

REM - Tennessee, Inc.  
 6299 Sturbridge Way, Room 304  
 Cordova, Tennessee 38018  
 Phone: (901) 737-9917 E-Mail:  
 Director: Cyndi Bergs Fax:  
 Chairperson:

**MWAD  
SL**

RHA - Resource Housing of America/Tennessee Group Homes, Inc.  
 Managed by:  
 DDM - Developmental Disabilities Management Services  
 RHA/Tennessee Group Homes, Inc.  
 5050 Poplar Avenue, Suite 1800  
 Memphis, Tennessee 38157 E-Mail: Int.ddms@netten.net  
 Phone: (901) 767-1455 Fax: (901) 767-1409  
 Director:  
 Chairperson: Bryant Coates  
 Send mail to Art Trunkfield, Chief Operating Officer

**MWAD  
SL**

**WEST TENNESSEE****FUNDED SERVICES****Senior Services****MWRES**

4700 Poplar Avenue, Suite 100

Memphis, Tennessee 38117-4411

Phone: (901) 766-0600

E-Mail: [Int:srsvic@memphisonline.com](mailto:Int:srsvic@memphisonline.com)

Fax: (901) 766-0699

Director: Deborah Cotney

Chairperson:

**Shelby Residential and Vocational Services, Inc.****AD**

3592 Knight Arnold

**FS**

Memphis, Tennessee 38118-2700

Phone: (901) 375-4804

Fax: (901) 362-1891

Director: Jeffrie Bruton

**MWAD**

Chairperson: Christine B. Munson

**MWRES****RESA****STAR Center****SS**

60 Lynnoak Cove

Jackson, Tennessee 38305

Phone: (901) 668-9695

E-Mail: [Int:mlane@starcenter.tn.org](mailto:Int:mlane@starcenter.tn.org)

Fax: (901) 668-1666

Director: Margaret Doumitt

Chairperson:

**Sunrise Community of Tennessee, Inc.****SL**

7531 Bartlett Corporate Cove East

**MWAD**

Suite 104

Bartlett, Tennessee 38134

Phone: (901) 386-8305

Fax: (901) 373-2543

Exec. Director: Brenda O'Quinn

Director: Janet TorresMartinez

Chairperson: Leslie W. Leech, Jr.

**T.A.P., Inc. (The Alternative Program, Inc.)****ISC**

207 National Drive, Apt. 97

Murfreesboro, Tennessee 37128

Phone: (615) 907-0305

Fax:

Director: Scot Booth

Director of Operations: Kim Hancock

Chairperson: John Schukle

**Team Evaluation Center (Memphis Office)****D & E**

777 Washington Avenue, Suite 340

Memphis, Tennessee 38103

Phone: (901) 572-3212

Fax: (901) 572-5320

Director: Alan Bullard

Administrator: Ann Beckham (send all mail to Ann)

Chairperson: Father James Marquis

**Tennessee Mentor****SL**

65 Germantown Court, Suite 112

Cordova, Tennessee 38018

Phone: (901) 753-0055

Fax: (901) 753-0206

Director: Kim Daugherty

**WEST TENNESSEE****FUNDED SERVICES**

United Methodist Neighborhood Centers  
 Susannah Center  
 P. O. Box 111348

EI

Memphis, Tennessee 38111-1348

Phone: (901) 323-4993

Fax: (901) 323-5264

Exec. Director: Karen Carothers

Program Dir: Alma Boyd

Chairperson: Marilyn Mukievicz

University of Tennessee at Martin  
 Infant Stimulation Program  
 340 Gooch Hall

EI

EI-H

Martin, Tennessee 38238-5045

Phone: (901) 587-7115

E-Mail: Int:swenz@utm.edu

Fax: (901) 587-7109

Director: Sharon Wenz

Chairperson: Dr. Martha Hemdon

The University of Memphis  
 Project Memphis (Barbara K. Lipman School)  
 3771 Poplar Avenue

EI

Memphis, Tennessee 38152

Phone: (901) 678-2120

E-Mail: Int:gaboyd@cc.memphis.edu

Fax: (901) 678-4778

Director: Dr. Gwendolyn Boyd

Chairperson: Dr. Lane Rawlins, University President

Vision Coordination Services, Inc.  
 885 S. Cooper Street

ISC

Memphis Tennessee 38104

Phone: (901) 722-2470 or pager 1-888-650-7013

Fax: (901) 722-2471

Director: Cedric Deadmon

Chairperson: Cedric Deadmon

VOCA Corporation

MWAD

211 Donelson Pike

Suite 11

SL

Nashville, Tennessee 37214

Phone: (615) 874-0011

Fax: (615) 874-0511

Director: Heidi Parworth

Chairperson:

Wesley Housing Corporation of Memphis  
 400 South Highland Avenue

MWRES

Memphis, Tennessee 38111

Phone: (901) 325-7800

Fax: (901) 325-7802

Director: Jerry Corlew

Chairperson: Randal Tomblin

West Tennessee Cerebral Palsy Association, Inc.  
 34 Garland Drive

AD

Jackson, Tennessee 38305

Phone: (901) 668-3322

Fax: (901) 664-2941

Director: Allen Dunn

Chairperson: Mickey Hannon

**STATEWIDE SERVICES**

The Arc of Tennessee  
 1719 West End Avenue, Suite 300E  
 Nashville, Tennessee 37203  
 Phone: (615) 327-0294 Fax: (615) 327-0827  
 Director: Mike Remus  
 Chairperson: Donald Redden

Community Rehabilitation Agencies of Tennessee, Inc.  
 530 Church Street, Suite 504  
 Nashville, Tennessee 37219  
 Phone: (615) 254-3077 Fax: (615) 254-3078  
 Director: Mindy Schuster  
 Chairperson: Kyle Hauth

People First of Tennessee, Inc.  
 855 West College Street  
 Unit D  
 Murfreesboro, TN 37129  
 Phone: (615) 898-0075 Fax: (615) 898-0057  
 Director: Ruthie-Marie Beckwith, Ph.D.  
 Chairperson: Edward Sewell

Tennessee Alliance on Support Coordination - TASC  
 2403 12<sup>th</sup> Avenue South  
 Nashville, Tennessee 37204  
 Phone: (615) 463-2880 Fax: (615) 463-2824  
 Director: Randall Moore  
 Chairperson: Randall Moore

Tennessee Disability Coalition  
 480 Craighead Avenue, Suite 200  
 Nashville, Tennessee 37204  
 (Mailing address: P.O. Box 120773)  
 Phone: (615) 383-9442 Fax: (615) 383-1176  
 Director: Carol Westlake  
 Chairperson: Joe Marshall

Tennessee Special Olympics  
 112 - 21st Avenue South, Suite 101  
 Nashville, Tennessee 37203  
 Phone: (615) 322-8292 Fax: (615) 343-9473  
 Director: Alan L. Bolick  
 Chairperson: David Schwab

**FUNDED SERVICES**

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**STATEWIDE SERVICES**

University of Tennessee  
TIE (Technology Inclusion Employment)  
1914 Andy Holt Avenue  
B025 HPER Building  
Knoxville, Tennessee 37996-2750  
Phone: (423) 974-9400 Fax: (423) 974-9180  
Director: Carolyn Henderson  
Assoc. Dir.: Debra Martin

**FUNDED SERVICES**

ST

# **Vocational Rehabilitation Services**

**Department of Human Services - Vocational Rehabilitation**

Vocational Rehabilitation is a federal/state funded program providing services to help individuals (ages 16 and above) with disabilities enter or return to employment. It is designed to help individuals of work age with disabling physical and/or mental impairments compete successfully with others in earning a livelihood. Only the Division of Rehabilitative Services can make the decision for eligibility. Medical examinations, psychosocial examinations or vocational evaluations are secured by this division to determine the nature and extent of the disability and to assist the Vocational Rehabilitation Services counselor in evaluating the individual's work potential and jointly selecting an occupational goal consistent with this potential.

***Offices in the Division of Rehabilitative Services:*****Region 1:**

Regional Supervisor  
905 Buffalo Street  
Johnson City, TN 37064 423/929-9142

Rehabilitative Services  
103 East Walnut Street  
Johnson City, TN 37601 423/929-3178

Rehabilitation Services  
201 Cherokee Street  
Kingsport, TN 37662 423/245-4278

Rehabilitation Services  
241 Baileytown Road  
Greeneville, TN 37743 423/639-5148

Rehabilitation Services  
Corner of E & Roan Street  
Elizabethton, TN 37643 423/542-4159

**Region 2:**

Regional Supervisor  
State Office Building, Suite 303B  
531 Henley Street  
Knoxville, TN 37902 423/594-6720

Rehabilitation Services  
Harriman Early Childhood Center  
P.O. Box 949  
Harriman, TN 37748 423/882-1475

Rehabilitation Services  
2418 North Morelock Road  
Morristown, TN 37814 423/587-7008

Rehabilitation Services  
Tennessee School for the Deaf  
2725 Island Home Road  
Knoxville, TN 37920

423/594-6154 (voice/TTY)

Region 3:

Regional Supervisor  
1501 Riverside Drive  
Chattanooga, TN 37406

423/493-6056

Rehabilitation Services  
290 Durkee Road, SE  
Cleveland, TN 37311

423/478-0328

Rehabilitation Services  
444 Neal Street, East  
Cookeville, TN 38501

931/526-9783

Rehabilitation Services  
Highway 52 Bypass  
Lafayette, TN 37083

931/666-2179

Rehabilitation Services  
125 Belmont Drive  
McMinnville, TN 37110

931/473-4667

(no Region 4)

Region 5:

Regional Supervisor  
88 Hermitage Avenue  
Nashville, TN 37210

615/741-1606

Rehabilitation Services  
1099 Cairo Road  
Gallatin, TN 37066

615/451-5827

Rehabilitation Services  
1405 A Brookwood Avenue  
Franklin, TN 37064

615/790-5506

Rehabilitation Services  
1241 Highway Drive  
Clarksville, TN 37040

931/648-5560

Goodwill Industries  
905 9<sup>th</sup> Avenue North  
Nashville, TN 37208

615/742-4151

Region 6:

Regional Supervisor 209 Wayne Street Columbia, TN 38401	931/380-2563
Rehabilitation Services 1132 Haley Road Murfreesboro, TN 37129	615/898-8084
Rehabilitation Services 1304 Railroad Avenue Shelbyville, TN 37160	931/685-5019
Rehabilitation Services 135 Baxter Lane Winchester, TN 37398	931/967-7738
Rehabilitation Services 1200 Oakdale Street Manchester, TN 37355	931/723-5072
Rehabilitation Services 2221 Thornton Taylor Parkway Fayetteville, TN 37334	931/433-4826
Rehabilitation Services 237 East Taylor Street Lawrenceburg, TN 37464	931/762-3486

Region 7:

Regional Supervisor 225 Martin Luther King Boulevard Suite 104-A, Box 15 Jackson, TN 38301	901/423-5620
Rehabilitation Services 1979 St. John Avenue Dyersburg, TN 38024	901/286-8315
Rehabilitation Services 314 Florida Street Union City, TN 38261	901/884-2600
Rehabilitation Services 508 North Market Street Paris, TN 38242	901/664-7361
Rehabilitation Services 168 South Forrest Camden, TN 38320	901/584-2147

Rehabilitation Services 724 Highway 51 North Covington, TN 38019	901/475-2505
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Rehabilitation Services 2100 Wayne Road Savannah, TN 38372	901/925-4968
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(no Region 8)

Region 9:

Regional Supervisor 170 North Main, Room 802 Memphis, TN 38103	901/543-7301
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***Tennessee Vocational Training Centers:***

A network of Vocational Training Centers is established throughout the state, with cooperation and partial funding from local governments. Usually located in rural areas, these services complement the more extensive rehabilitation and related service facilities of the state's larger cities. These facilities provide vocational evaluation, adjustment, and placement services for individuals with disabilities.

Tennessee Vocational Training Centers include:

168 South Forrest Avenue Camden, TN 38320	901/584-7015
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1241 Highway Drive Clarksville, TN 37040	931/648-5560
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2895 Bates Pike SE Cleveland, TN 37323	423/478-0332
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206 Wayne Street Columbia, TN 38401	931/220-2550
--	--------------

1605 Brown Avenue Cookeville, TN 38501	931/526-4721
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1979 St. John Avenue Dyersburg, TN 38024	901/286-8313
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Corner of E & Roan Street Elizabethton, TN 37643	423/542-4159
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1405A Brookwood Avenue Franklin, TN 37064	615/790-5509
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1099 Cairo Road Gallatin, TN 37066	615/451-5826
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241 Baileyton Road Greeneville, TN 37743	423/639-5148
Highway 52 Bypass Lafayette, TN 37083	931/666-2179
1200 Oakdale Street Manchester, TN 37355	931/723-5070
1627 Percheron Street Maryville, TN 37801	423/981-2382
2418 North Morelock Road Morristown, TN 37814	423/587-7006
1132 Haley Road Murfreesboro, TN 37129	615/898-8088
150 Rison Street Paris, TN 38242	901/644-7363
1304 Railroad Avenue Shelbyville, TN 37160	931/685-5017
314 Florida Street Union City, TN 38261	901/884-2600
135 Baxter Lane Winchester, TN 37398	931/967-4511

***Residential Vocational Rehabilitation Facility:***

The Tennessee Rehabilitation Center in Smyrna is the state's only comprehensive residential vocational rehabilitation facility. Five service delivery programs are offered which are designed to meet the needs of Rehabilitation Services clients: comprehensive rehabilitation evaluation, work adjustment, vocational training, medical rehabilitation and visually impaired services.

Tennessee Rehabilitation Center 460 9 <sup>th</sup> Avenue Smyrna, TN 37167	615/741-7921
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# **Alcohol and Drug Abuse Services**

## **Department of Health – Alcohol and Drug Abuse Services**

The problems of chemical dependency and substance abuse impact everyone whose lives are touched by these issues. The Division of Alcohol and Drug Abuse Services funds treatment, intervention and rehabilitation services through community-based outpatient and residential treatment facilities across the state. Targeted activities designed to prevent alcohol and other drug abuse among youth and adults are conducted regularly.

### **Treatment Programs**

To contact this Division for further information, call 615/741-1921.

#### ***Adolescent Residential Treatment:***

Adolescent residential treatment services are designed to restore the severely dysfunctional alcohol and other drug dependent youth (ages 13-18) to levels of positive functioning appropriate to the individual. Residents will usually live in the facility around the clock from three to six months.

#### ***Adolescent Day Treatment:***

Adolescent day treatment provides care and treatment during the day and/or evening hours for abusers of alcohol and other drugs who are 13-18 years of age. The average length of participation is 6-12 month, 5 days a week, 4 hours a day. Day programs may also include academic services.

#### ***Dual Diagnosis Programs:***

Dual Diagnosis Programs assist clients in receiving treatment for both disorders, mental illness and chemical dependency, with the emphasis placed upon identifying and treating the primary diagnosis.

#### ***Family Intervention and Referral Service:***

This service provides a structured treatment program that provides short-term counseling and intervention to members of the family who reside with a person who is actively dependent, as well as the chemically dependent person.

### **Prevention Services:**

To contact this Division for further information, call 615/741-1921.

#### ***Intensive Focus Group Programs:***

Intensive focus group programs are structured, short-term (12 weeks) education counseling programs for youth and their families. Programs target youth (10-18 years of age) identified as high risk for developing alcohol and other drug problems and/or high risk to develop unhealthy living patterns due to negative impacts of the environment they live in. At least one intensive focus group program available for every county statewide.

#### ***Tennessee Teen Institutes:***

Tennessee Teen Institute is a weeklong training and personal development program designed to prepare youth for a leadership role in the development of school and community based prevention programming.

***Statewide Clearinghouse:***

The Statewide Clearinghouse serves as a centralized resource for materials and information that is easily accessible by local and toll-free telephone numbers. The toll-free number for Tennessee Redline is **1-800/889-9789** or the local number is **615/244-7066**. The Tennessee Redline serves as a referral source for individuals requiring information or treatment. Redline services provide 12 hour telephone services, 5 days a week, which are available to the general public.

# **Services Offered by the Department of Children's Services**

## **Department of Children's Services**

The Department of Children's Services provides a full range of services to children in, and at risk of, state custody and their families.

Through a variety of public and private agencies, administered in a managed care environment, the department is responsible for:

- Child protective services,
- Foster care,
- Adoption,
- Programs for delinquent youth,
- Probation,
- Aftercare,
- Treatment and rehabilitation programs for identified youth, and
- Licensing for all child-welfare agencies.

The agency's main office may be reached by calling 615/741-9699.

Listings for Providers, Community Residential Programs, and Departmental Treatment Facilities follow.

## PROVIDER DIRECTORY LIST

Agape Child and Family Services, Inc. P.O. Box 11411 Memphis, TN 38111 901-272-7339	AGAPE, Inc. 4555 Trousdale Nashville, TN 37204 615-781-3000	American Counseling System P.O. Box 309 603 West Main Hohenwald, TN 38462 931-796-2039
American Family Institute P.O. Box 948 Chattanooga, TN 37401 423-266-6939	American Family Institute 1314 Chamberlain Avenue Chattanooga, TN 37404 423-266-6939	Associated Catholic Charities of E TN, Inc. 119 Dameron Dr. Knoxville, TN 37917 423-524-9896
Bachman Memorial Home, Inc. P.O. Box 849 Cleveland, TN 37364 423-479-4523	Bethany Home 901 Chelsea Ave. Memphis, TN 38107 901-525-1837	Bethel Bible Village P.O. Box 5000 3001 Hamil Road Hixson, TN 37343 423-824-5757
Blount County Children's Home 903 McCammon Ave. Maryville, TN 37801 423-982-6361	Camelot Care Centers, Inc. 659 Emory Valley Road Oakridge, TN 37830 423-481-3972	Carent, Inc. 1220 8th Ave S. Nashville, TN 37203 315-742-3000
Carey Counseling Center/Group Home 408 Virginia Street P.O. Box 30 Paris, TN 38242 901-642-0521	Catholic Charities St. Peter Home for Children 3060 Baskin Memphis, TN 38127 901-354-6300	Central Appalachia Services, Inc. P.O. Box 30809 Kingston, TN 37662 423-578-3900
Charter Lakeside 2911 Brunswick Road Memphis, TN 38133 901-377-4701	Child & Family Services, Inc. 901 East Summit Hill Drive Knoxville, TN 37915 423-524-7483	Child Shelter, Inc. 500 Tasso Lane, NE Cleveland, TN 37312 423-479-2520
Children's Home Chambliss Shelter 315 Gillespie Road Chattanooga, TN 37411 423-698-2456	Church of God Home for Children P.O. Box 4391 Sevierville, TN 37864 423-453-4644	Columbia Valley Hospital 2200 Morris Hill Road Chattanooga, TN 37421 423-894-4220
Corrections Corp. of America 10 Burton Hills Dr Suite 800 Nashville, TN 37215 615-292-3100	DeDe Wallace Center P.O. Box 70189 Nashville, TN 37207 615-463-6627	DeNeuille Heights School 3060 Baskin Street Memphis, TN 38127 901-357-7316
Dyersburg-Dyer County Union Mission P.O. Box 179 Dyersburg, TN 38025-0179 901-285-0726	East Tennessee Christian Home P.O. Box 1147 Elizabethton, TN 37644 423-542-4423	East TN Christian Services, Inc. P.O. Box 52703 Knoxville, TN 37950 423-584-0841

Eckerd Family Youth Alternatives 421 Catfish Farm Road Deerlodge, TN 37726 931-863-5366	Emergency Child Shelter, Inc. 208 Parkway Blvd. Elizabethton, TN 37643 423-543-6696	Family & Children's Services of Chattanooga 300 East 8th Street Chattanooga, TN 37403 423-755-2808
Family & Children's Services of Nashville 201 23rd Avenue North Nashville, TN 37203 615-320-0591	Family & Educational Advisory Associates 100 Oaks Office Tower 719 Thompson Lane Suite 600 Nashville, TN 37204 615-383-2232	Family Link 1528 Poplar Memphis, TN 38104 901-752-6911
FHC Nashville 804 Youngs Lane Nashville, TN 37207 615-228-4848	First Tennessee Human Resource Agency 112 East Myrtle Ave., Suite 101 Johnson City, TN. 37601 423-461-8209	Free Will Baptist Family Ministries, Inc. 90 Stanley Lane Greeneville, TN 37743 423-639-9449
Gateway House, Inc. P.O. Box 220 Louisville, TN 37777 423-983-8603	Genesis Learning Centers 430 Allied Drive Nashville, TN 37211 615-832-4222	Glen Mills School Glen Mills Road Concordville, PA 19331 610-459-8100
Goodwill Homes Community Services, Inc. P.O. Box 161282 Memphis, TN 38186-1282 901-785-6790	Greater Chattanooga Christian Services P.O. Box 4535 Chattanooga, TN 37405 423-756-0281	Guidance Center 118 North Church Street P.O. Box 1559 Murfreesboro, TN 37133 615-893-0770
Happy Haven Homes 2311 Wakefield Dr. Cookeville, TN 38501 931-526-2052	Happy Hills Boys Ranch 1115 Ranch Road Ashland City, TN 37015 615-307-3205	Harriet Cohn Mental Health Center 511 8th Street Clarksville, TN 37040 931-648-8126
Holston United Methodist Home for Children P.O. Box 188 Greeneville, TN 37744 423-638-4111	Jabneel, Inc. P.O. Box 690 Powell, TN 37849 423-687-6141	Jackson Academy 222 Church Street Dickson, TN 37055 615-446-3900
John Tarleton Home 2455 Sutherland Avenue Knoxville, TN 37919 423-525-6154	Joseph W. Johnson Jr. Mental Health Center, Inc. P.O. Box 4755 Chattanooga, TN 37405-0735 423-756-2740	Kingswood School P.O. Box 5000 Bean Station, TN 37708 423-767-2121
Lewis Ambulatory Care Center, Ambulatory Care Center, New Hope D & E 617 West Main Street Hohenwald, TN 38462 615-381-1111 ext. 1000	Lutheran Family Services of TN 3508 Maryville Pike Knoxville, TN 37920 423-579-0039	Madison Children's Home P.O. Box 419 Madison, TN 37116-0419 615-860-4416

Magnolia Health & Education Route 6, Box 221-A Columbia, TN 38401 615-377-8715	Memphis Recovery Centers 219 North Montgomery Memphis, TN 38104 901-272-7751	Metro Social Services Richland Village 25 Middleton Street Nashville, TN 37210 615-862-6432
Middle Tennessee Mental Health Institute 221 Stewarts Ferry Pike Nashville, TN 37214 615-902-7535	Midtown Mental Health Center, Inc. 427 Lynden Memphis, TN 38126 901-577-9463	Moccasin Bend Mental Health Institute Moccasin Bend Road Chattanooga, TN 37405 423-785-3400
Monroe Harding Children's Home 1120 Glendale Lane Nashville, TN 37204 615-298-5573	Mur-Ci Homes, Inc. P.O. Box 735 Antioch, TN 37011 615-641-6446	My Friends House 626 Eastview Drive Franklin, TN 37064 615-790-8919
New Life Home, For Boys Inc. P.O. Box 15676 Chattanooga, TN 37415 423-877-7897	New Life Youth Home Dyersburg Dyer County Union Mission 250 Youth Home Rd. Dyersburg, TN 38024 901-286-1866	Oasis Center, Inc. P.O. Box 121648 Nashville, TN 37212 615-327-4455
Omni Visions 101 Lea Avenue Nashville, TN 37210 615-726-3603	Pathways of Tennessee, Inc. 238 Summar Drive Jackson, TN 38301 901-935-8320	Peninsula Healthcare System P.O. Box 2000 Louisville, TN 37777 423-970-1881
Plateau Mental Health Center P.O. Box 3165 Cookeville, TN 38502-3165 423-756-2740	Porter-Leath Children's Center 868 North Manassas Memphis, TN 38107 901-577-2500	Progress, Inc. (Our House) P.O. Box 10045 Nashville, TN 37204 615-297-3344
Quinco Community Mental Health 10710 Highway 64 West Bolivar, TN 38008 901-658-6113	Recovery Residences 217 24th Ave North Nashville, TN 37203 615-353-4385	Residential Services, Inc. 1451 Elm Hill Pike, Suite 161 Nashville, TN 37210-4523 615-367-4333
Senior Citizens Services, Inc. 4700 Poplar Avenue, Suite 100 Memphis, TN 38117 901-766-0600	Sullivan County Youth Center 852 Youth Center Road Blountville, TN 37617 423-279-2718	Tennessee Children's Home P.O. Box 10045 Spring Hill, TN 37174 931-486-2274
The Florence Crittenton Agency, Inc. 1531 Dick Lonas Road Knoxville, TN 37909 423-602-2021	The King's Daughters' School 412 West 9th Street Columbia, TN 38401 931-388-3810	Trac, Inc. 220 S. Hickory Street Gallatin, TN 37066 615-451-2154
Triad Children & Youth Services 204 E. Spring Street Cookeville, TN 38501 931-528-8370	Upper Cumberland Human Res. 3111 Enterprise Dr. Cookeville, TN 38506 931-528-1127	Upper Cumberland Teen Ranch 355 Mayland Loop Crossville, TN 38555 931-277-3024

Watauga Mental Health Services, Inc. 109 West Watuaga Avenue P.O. Box 2226 Johnson City, TN 37605 423-928-6546	Wayne Halfway House 1117 Santa Hwy Waynesboro, TN 38485 931-722-3272 or 9976	West Tennessee Children's Home 170 Frank Latham Rd. Pinson, TN 38366 901-989-7335
Western Mental Health Institute 11100 Highway 64 Western Institute, TN 38074 901-658-5141	Wilson County Youth Emergency Shelter 553 Victor Avenue Lebanon, TN 37087 931-443-7222	Youth Emergency Shelter 407 West 5th Street North Morristown, TN 37814 423-586-7740
Youth Services Inc. P.O. Box 6012 Oak Ridge, TN 37831	Youth Services International of Tennessee, Inc. 5908 Lyons View Drive Jane Keller Building Knoxville, TN 37919 423-584-5630	Youth Town of Tennessee, Inc. P.O. Box 1385 Jackson, TN 38302 901-988-5251
Youth Villages P.O. Box 341154 Memphis, TN 38184 901-867-8832		YWCA Try Angle House 1608 Woodmont Blvd. Nashville, TN 37215 615-269-9922

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Send Comments to : [Department of Children's Services](#)

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# Community Residential Programs

## NORTHEAST TENNESSEE REGION

Northeast Tennessee Academy (N.E.T. Academy) Department of Children's Services 200 Quarry Road Johnson City, Tennessee 37601 (423) 929-8300 Fax: (423) 434-6496	Johnson City Boys Group Home Department of Children's Services 208 Quarry Road Johnson City, Tennessee 37601 (423) 929-8101 Fax: (423) 928-8632
Elizabethton Group Home * Department of Children's Services 150 Hatcher Lane Elizabethton, Tennessee 37643 (423) 543-1871 Fax: (423) 547-0913	Johnson City Observation & Assessment Center Department of Children's Services 210 Quarry Road Johnson City, Tennessee 37601 (423) 929-1240 Fax: (423) 434-6497
L.I.F.T Academy ** Department of Children's Services Route 1, Box 2965 Elizabethton, Tennessee 37643 (423) 547-4050 Fax: (423) 547-4061	

## EAST TENNESSEE REGION

Madisonville Group Home * Department of Children's Services 249 Wayman Road Madisonville, Tennessee 37354 (423) 442-7411 Fax: (423) 442-7413	Oak Ridge Group Home Department of Children's Services 125 Lancaster Road Oak Ridge, Tennessee 37830 (423) 483-1170 Fax: (423) 483-9793
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## UPPER CUMBERLAND REGION

Cookeville Halfway House Department of Children's Services 1230 North Willow Cookeville, Tennessee 38501 Fax: (423) 528-9299	
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## DAVIDSON COUNTY REGION

Nashville Transition Center Department of Children's Services 2412 Plum Street Nashville, Tennessee 37207 (615) 741-1505 Fax: (615) 227-5307	
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## SOUTHWEST REGION

Jackson Halfway House  
Department of Children's Services  
235 North Highland Avenue  
Jackson, Tennessee 38301  
(901) 423-6654  
Fax: (901) 426-0533

## SHELBY COUNTY REGION

Memphis Group Home  
Department of Children's Services  
305 North Bellevue  
Memphis, Tennessee 38301  
(901) 726-6872  
Fax: (901) 726-0174

Peabody Residential Treatment Center  
Department of Children's Services  
1242 Peabody Avenue  
Memphis, Tennessee 38104  
(901) 543-7943  
Fax: (901) 276-1406

\* Denotes programs for girls only

\*\* Denotes programs for girls and boys

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Send Comments to : Department of Children's Services

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# Departmental Treatment Facilities Directory

Woodland Hills Youth Development Center** Department of Children's Services 3965 Stewarts Lane Nashville, Tennessee 37243-1297 (615) 532-2000 Fax: (615) 532-8402 Superintendent: Ken Curry	Taft Youth Development Center Department of Children's Services Route 4, Box 400 Pikeville, Tennessee 37367 (423) 881-3201 Fax: (423) 881-4617 Superintendent: Larry Lively
Wilder Youth Development Center Department of Children's Service P.O. Box 639 13870 Highway 59 Somerville, Tennessee 38068 (901) 465-7359 Fax: (901) 465-7363 Superintendent: Jeannette Birge	Mountain View Youth Development Center Department of Children's Service 809 Peal Lane Dandridge, Tennessee 37725 (423) 397-0174 Fax: (423) 397-0738 Superintendent: Gary Morris
Tennessee Preparatory School ** Department of Children's Services 1200 Foster Avenue Nashville, Tennessee 37243-0385 (615) 741-4018 Fax: (615) Superintendent: Butch Garrett	

\* Denotes programs for girls

\*\* Denotes programs for girls and boys

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Send Comments to : Department of Children's Services

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**Services Offered by the Tennessee  
Commission on Children and  
Youth**

## **Tennessee Commission on Children and Youth**

The objectives of the Tennessee Commission on Children and Youth are performed through seven program areas:

1. *Advocacy*: TCCY provides leadership for advocacy activities on behalf of children and families.
2. *Juvenile Justice*: TCCY is the state advisory group responsible for implementing the provisions of the Juvenile Justice and Delinquency Prevention (JJDP) Act in Tennessee.
3. *Ombudsman Program*: The TCCY Ombudsman staff serve as neutral reviewers to respond to questions, concerns, or complaints regarding children in state custody.
4. *Evaluation of Services for Children*: TCCY conducts targeted evaluations and is responsible for the Children's Program Outcome Review Team (C-PORT) evaluation and the Impact Study. C-PORT collects, analyzes, and reports essential information about the population of children in state custody and their families. The Impact Study utilizes an intensive case review approach to assess the impact of managed care on the delivery of TennCare/Medicaid services to children, with a special focus on children with serious emotional disturbances.
5. *Regional Councils*: TCCY staffs and coordinates nine regional councils that provide organizational structure for statewide networking on behalf of children and families.
6. *Information Dissemination*: TCCY regularly produces and distributes various publications, newsletters and reports which disseminate information on children's issues.
7. *Teenage Pregnancy*: TCCY administers state funds directed toward teenage pregnancy prevention and teen parenting.

This agency may be reached by calling 615/741-6239.

## **Attachment G**

# **Information for Special Education Coordinators**



STATE OF TENNESSEE  
BUREAU OF TENNCARE  
DEPARTMENT OF FINANCE AND ADMINISTRATION  
729 CHURCH STREET  
NASHVILLE, TENNESSEE 37247-6501

MEMORANDUM

TO: LEA Special Education Coordinators

FROM: *WJ*  
Wendy Long, M.D., M.P.H.  
Acting Director, TennCare Program

SUBJECT: Related services for children with disabilities

DATE: September 11, 1998

As you may be aware, TennCare covers a broad array of health services for children. We are very interested in assuring that these services are coordinated with other health services that might be offered to children, such as health services in the schools.

We are aware that the Individualized Education Programs (IEPs) which the school system develops for children who have been identified for special education services under IDEA may contain recommendations for "related services" which the child needs in order to benefit from his special education program. A number of these "related services" are medical in nature.

Each TennCare child is enrolled in a Managed Care Organization (MCO), and each TennCare child has a primary care provider (PCP) within that MCO who is responsible for coordinating the child's care. Primary care providers are usually pediatricians, family practitioners, general practice physicians, or nurse practitioners. A list of the TennCare MCOs is attached. We hope that you will work with the MCOs and their PCPs in planning and delivering services to children with disabilities.

The MCOs are responsible for requesting copies of IEPs for their enrollees. We are suggesting that this be done through the children's PCPs when the PCP is made aware that the child is enrolled in special education. We are working on a release form for parents which you may want to consider using for this purpose. The MCOs are required to accept the IEP indication of a medical problem or need for further testing as an "interperiodic screen" under the EPSDT ("Early and Periodic Screening, Diagnosis, and Treatment") program and to arrange for follow-up screenings to determine if additional testing or treatment is medically necessary.

I would like to suggest the following actions on your part:

1. When you know that a particular child identified under IDEA has TennCare, please ask the child's parent or guardian to notify the child's PCP that the child is enrolled in special education and has an IEP. If the parent does not know who the child's PCP is, he or she can call the MCO. Parents usually know the name of the MCO in which their child is enrolled since it is on the child's TennCare enrollment card, along with a telephone number for the MCO. If the parent does not

know which MCO his child has, he can call the TennCare Information Line at 1-800-669-1851 (741-4800 in the Nashville area).

2. Please ask the child's parent or guardian to agree that the child's IEP can be shared with the PCP. We would appreciate your sending a copy of this document to the PCP once you have appropriate permission.
3. Please make sure that the child's PCP has as much information as possible about the medically related services that have been identified in the IEP as being needed for the child. We hope that you will help your parents of TennCare IDEA children be sure that their children's primary care providers are aware of the recommendations contained in the IEP so that they can help these children get necessary TennCare services.

If you would like more information, please call Susie Baird at (615) 741-0213.

Thank you for your attention to this matter.

cc: Joe Fisher, Director of Special Education, Tennessee Department of Education



STATE OF TENNESSEE  
DEPARTMENT OF HEALTH  
BUREAU OF TENNCARE  
729 CHURCH STREET  
NASHVILLE, TENNESSEE 37247-6501

MEMORANDUM

TO: LEA Special Education Coordinators

FROM: Wendy Long, M.D., M.P.H. *wylfb*  
Acting Director, TennCare Program

SUBJECT: Release of information for IEP

DATE: September 30, 1998

Last week I wrote you a letter suggesting coordination with the TennCare Managed Care Organizations (MCOs) on the delivery of related services to your students with disabilities who are enrolled in TennCare.

I mentioned in that letter that I would be sending you a release form which you might consider using to allow parents to release IEP information to the MCO and the child's primary care provider (PCP). A sample form is attached. If you are able to provide this or a similar form to parents at or before M-team meetings, you will then have a signed release which will allow you to send a copy of the child's IEP to the child's PCP. The MCOs are required to accept the IEP indication of a medical problem or need for further testing and to follow up with further diagnosis and treatment as medically necessary.

I hope this form is helpful to you. If you would like additional information, please call Susie Baird at (615) 741-0213.

cc: Joe Fisher, Director of Special Education, Tennessee Department of Education  
Judy Womack, Director of Project TEACH, Tennessee Department of Health

# TennCare

## RELEASE OF INFORMATION FOR INDIVIDUAL EDUCATION PLAN

Please be advised that permission is given for \_\_\_\_\_  
(name of school)  
to release information concerning :

\_\_\_\_\_  
Full Name of Child

\_\_\_\_\_  
Social Security Number

I understand that the information released will be in the form of an Individual Education Plan (IEP) for this child, which identifies his/her need to receive medically necessary services in an educational setting. This information will be released to the child's TennCare Managed Care Organization (MCO) and his/her Primary Care Provider (PCP) so that appropriate services will be provided to this child. Confidentiality of this information is required by contract and will be made available only to those individuals directly concerned with this child's diagnosis, care and treatment.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

## MEMORANDUM

TO: MCO Executive Directors

FROM: Wendy Long, M.D., M.P.H.  
Acting Director

SUBJECT: EPSDT Consent Decree, Paragraph 81

DATE: September 11, 1998

Paragraph 81 of the EPSDT Consent Decree says that the State "shall require use of a process to provide information to MCOs when children have been identified as needing to receive medically related services in an educational setting, to facilitate MCO coordination of EPSDT services."

Children who are identified as needing medically related services in an educational setting are children who have been identified by their local school systems as "children with disabilities" under the Individuals with Disabilities Act (IDEA). Your Appeals Coordinators received information about IDEA at a meeting conducted by the Department of Health Appeals Unit on April 21, 1998. Children who have been identified as requiring special education under IDEA must have Individualized Education Programs (IEPs) which list the special education and "related services" they are to receive. "Related services" are defined as services that are required to assist a child with a disability in benefiting from his special education program. "Related services" include such things as speech-language pathology and audiology services, psychological services, counseling services, and medical services for diagnostic and evaluation purposes.

In accordance with Paragraph 81, I have sent the attached memorandum to Special Education Coordinators of all Local Educational Agencies (LEAs) in the State. I realize that school personnel will not always know which of their students are TennCare eligible (parents are not required to tell them), and you will not always know which of your enrollees have been identified as "children with disabilities" under IDEA (parents are not required to tell you, either). Although confidentiality is clearly an issue for both TennCare and the school system in sharing this information, it is important that we work toward making appropriate linkages wherever possible.

We are asking the school systems to advise parents of TennCare children to tell their PCPs when their children are enrolled in special education programs, and we are also including a notice to enrollees with the ballot information going out next month. We are also asking the school systems to send copies of the IEPs to the children's PCPs. Please work with your PCPs to be sure that they (1) know what an IEP is, (2) get copies of children's IEPs whenever possible, and (3) coordinate TennCare benefits with the related services identified in the IEPs. We will be providing you with more information on this shortly.

Please call Susie Baird at (615) 741-0213 if you need additional information. Your attention to this matter is appreciated.

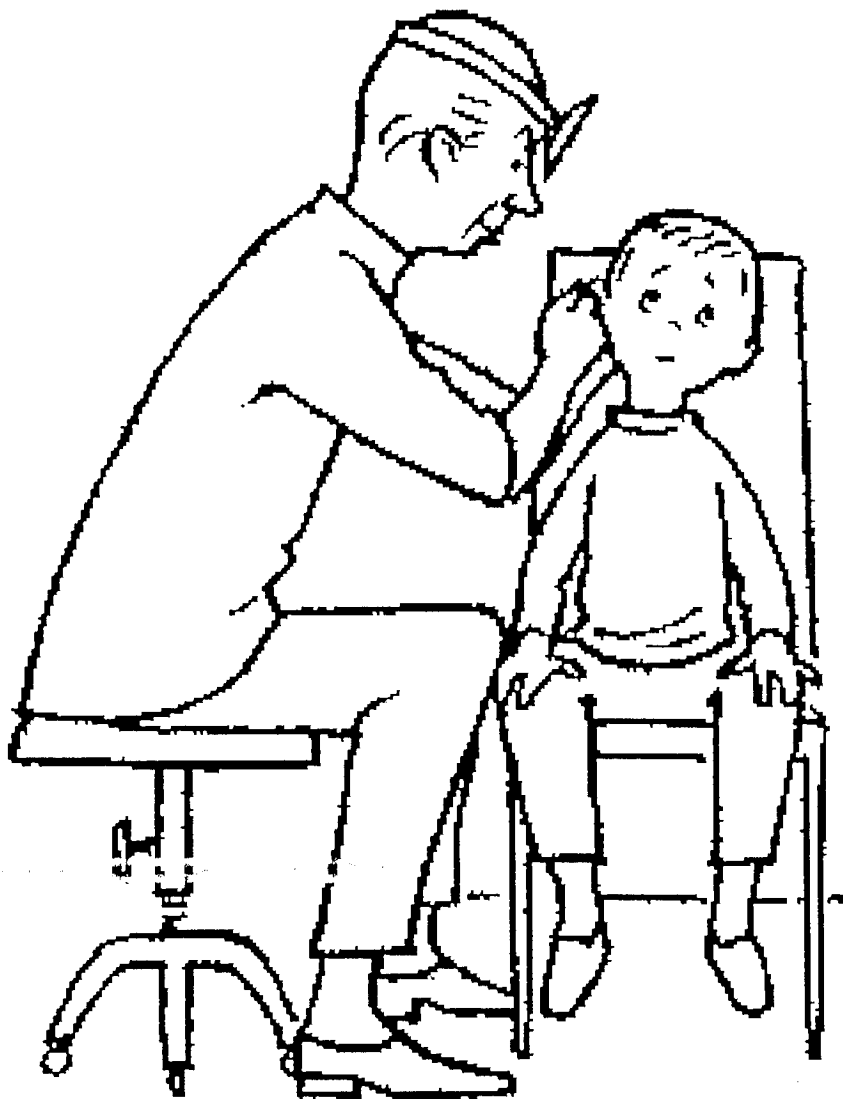
## **Attachment H**

# **DCS Provider Handbook**

Document ID: DCS-2019-001 | Version: 1.0 | Date: 10/1/2019

*A Guide to TennCare  
for Children in state custody*

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*A handbook for providers, foster parents, and DCS case managers  
containing information on EPSDT covered services*

***This handbook contains:***

- ***questions & answers Guide***
- ***DCS Regional offices***                      ***Attachment A***
- ***TennCare Covered Services***              ***Attachment B***
- ***Scope of Covered Benefits***              ***Attachment C***  
    ***under EPSDT***
- ***MCOs and BHOs***                          ***Attachment D***
- ***Useful Telephone numbers***              ***Attachment E***
- ***Federal Definitions of Covered***       ***Attachment F***  
    ***Services Under EPSDT***
- ***TennCare Appeals Form***                  ***Attachment G***

# **Children in State Custody**

## **A Guide to TennCare Services**

### ***1. How does a child come into “state custody?”***

Children come into state custody when a juvenile court finds that a child is dependent and neglected, unruly, or delinquent. Being in state custody means that the child’s well-being and/or community safety requires that the child must be taken out of the home. The Department of Children's Services is the department in Tennessee responsible for children in state custody.

- DCS stands for the Department of Children’s Services. The Commissioner is George Hattaway. There are 12 geographic regions in the department and each is managed by a Regional Administrator. (See Attachment A for names and phone numbers). You may contact the Regional Administrator regarding questions about DCS policy or programs.

### ***2. Where does a child in state custody live?***

Children in state custody may live in a variety of settings. These may include relatives’ homes, foster homes, or residential settings. A child may be in “legal” custody of DCS, yet live with their parent or other family member. When DCS is providing for a child’s residential needs, that child is said to be in “physical custody” of DCS. An example of physical custody is when a child is living in a group home under contract with DCS to provide care.

### ***3. Do all children in state custody have TennCare?***

Almost all children in state custody are eligible for TennCare under the “Children in Special Living Arrangements” category. This is a Medicaid category, which means that state custody children do not have any TennCare cost-sharing obligations. Even if a child is already on TennCare as an Uninsured or Uninsurable with cost-sharing obligations, the child’s eligibility category will be changed when he or she comes into custody after notification is provided to TennCare of this change, and there will no longer be any cost-sharing requirements.

Juveniles who are incarcerated for criminal offenses are not eligible for TennCare. These children receive their medical care through DCS or through the institution in which they reside.

### ***4. What is the first TennCare service a child in state custody is likely to receive?***

Assuming that there are no emergencies, the first contact may most likely be at a well child screen, or EPSDT screening. An appointment will be made when a child comes into custody, unless the child already has a current medical screening.

- TennCare requires that MCOs must provide that their patients are able to make regular appointments for non-emergency services within 3 weeks. Urgent Care must be provided within 48 hours. MCOs and BHOs must also insure that emergency services will be delivered immediately.

## 5. What is EPSDT?

"EPSDT" stands for Early and Periodic Screening, Diagnosis, and Treatment. This is a very important program for children under the age of 21. Early, Periodic, Screening, Diagnosis, and Treatment ("EPSDT") services means **screening services, vision services, dental services, hearing services,** and such other necessary health care, diagnosis services, treatment, and other measures to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services.

Every child under the age of 21 is eligible for EPSDT. These children should get regular check-ups even if there is no apparent health problem. EPSDT screens should be provided by the MCOs at the following times:

### **For infants and toddlers:**

At birth	4 months old	15 months old
2-4 days old	6 months old	18 months old
1 month old	9 months old	24 months old
2 months old	12 months old	

### **For older children and adolescents:**

3 years old	11 years old	17 years old
4 years old	12 years old	18 years old
5 years old	13 years old	19 years old
6 years old	14 years old	20 years old
8 years old	15 years old	
10 years old	16 years old	

*If a case manager, foster parent or caregiver suspects a problem, they should arrange for an EPSDT check-up, even if it is not yet time for one.* This referral is called an "interperiodic screen" and must be followed up on by the MCO. EPSDT screens, including "interperiodic screens," do not have to be "medically necessary" in order to be covered by the MCO.

Mary Anderson, who is 12 years old, had an EPSDT screening six months ago. She is not due to have another one for another six months. A staff member in Mary's group home notices on an outing to the park that Mary seems to be having trouble hearing. The staff member should refer Mary to her PCP for an interperiodic screen to find out if there is a problem that needs more attention. There is no need to wait until the next regularly scheduled periodic screening.

The child's primary care provider in his or her MCO generally performs the EPSDT screen. Just as important as the screenings is the follow-up. Providers who perform EPSDT screens may identify potential health, developmental, or behavioral problems. Providers are responsible for making referrals to other MCO and BHO providers to do further testing or to provide treatment, as appropriate. While there is no requirement that EPSDT periodic or interperiodic screenings be medically necessary, additional testing and treatment services must meet the medical necessity criteria outlined below.

All TennCare services, except for EPSDT screenings, must be **medically necessary**. The TennCare definition of “medically necessary” is used by MCOs, BHOs, and DCS. It is as follows:

*Medical assistance services or supplies provided by an institution, physician, or other provider that are required to identify or treat a TennCare enrollee’s illness, disease, or injury and which are:*

- a. Consistent with the symptoms or diagnosis and treatment of the enrollee’s illness, disease, or injury, and*
- b. Appropriate with regard to standards of good medical practice; and*
- c. Not solely for the convenience of an enrollee, physician, institution, or other provider; and*
- d. The most appropriate supply or level of services which can safely be provided to the enrollee. When applied to the care of an inpatient, it further means that services for an enrollee’s medical symptoms or condition require that the services cannot be safely provided to the enrollee as an outpatient; and*
- e. When applied to enrollees under 21 years of age, services shall be provided in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Reconciliation Act of 1989.*

- ***Attachment B lists TennCare covered services, and Attachment C delineates EPSDT services specifically.***

**6. *Why is the well child, or EPSDT screen so important for children in state custody?***

Children in state custody tend to have a greater need for medical, dental, and behavioral health services than other children. The EPSDT screen can identify these needs when the child first enters custody so that services may be implemented quickly to aid the child.

**7. *What special needs or concerns might a child in state custody have?***

A child in state custody may have special health and/or behavioral health needs relating to past physical, sexual, or emotional abuse. There may be health or behavioral health problems associated with severe neglect or ongoing behavior leading to delinquent acts. There may also be special needs associated with abandonment or other maltreatment by parents, developmental delays, learning disabilities, or mental retardation.

**8. *Can Children in state custody have other insurance?***

Children who are eligible in any of the Medicaid categories, including “Children in Special Living Arrangements,” can have other insurance and still be TennCare eligible. Those children who have private insurance generally are covered under their parents’ policy. When a child has insurance other than TennCare, that insurance should be billed first.

**9. *Who will bring the child to the office?***

An appointment will most likely be made by the DCS case manager for the child. The child may be brought to the appointment by the case manager, foster parent, or other adult caregiver. If questions arise about this coordination, they should be directed to the case manager.

**10. *During and after the visit, who should a provider communicate with about the child’s needs?***

Communication concerning the child’s health may be communicated immediately to the caregiver accompanying the child to the appointment. For ongoing feedback, information should be given to the DCS case manager, the DCS residential case manager who works with the child onsite where the child resides, or the foster parent.

**11. *Who may sign a consent form on behalf of the child for medical records?***

The DCS case manager has the authority to sign a release for a physician or other health provider to obtain other medical/health records. Natural parents of children in custody also may sign a release for information on their children to be provided to another physician or health provider as long as a termination of parental rights has not occurred.

**12. *If a child’s parent says “I’m going to place my child in state custody to get services,” to whom should they be referred?***

It is not the policy of the Department of Children's Services to require or suggest state custody as a way for parents to access services. Tell the parent that many children are eligible for TennCare, and that TennCare provides some services that other insurance may not. Refer them to their county Department of Human Services or county Health Department to see if their child might qualify for TennCare. See Question 22. If they are having difficulty accessing services through TennCare, refer them to the Consumer Advocacy phone line referenced in Question 19.

- The Governor has greatly expanded TennCare coverage for children. If you serve a family whose children are uninsured, please refer them to their local county health department.

**13. *What services are available through TennCare?***

Attachment B entitled TennCare Covered Services shows the services that are covered by the TennCare MCOs and BHOs. TennCare also covers long-term care, meaning services in a Nursing Facility or an Intermediate Care Facility for the Mentally Retarded (ICF/MR). These

services are covered outside the MCOs and BHOs. Other services covered by TennCare outside the MCOs and BHOs are Medicare cost-sharing and Home and Community Based Waiver Services. DCS administers enhanced TennCare services for children in custody. See Question 17. This includes residential treatment. Attachment C shows who is responsible for providing EPSDT services.

**14. What is “prior authorization,” and why is it important?**

A number of MCO and BHO services must receive “prior authorization” in order for them to be paid for by the MCO or BHO. “Prior authorization” means that the provider must call the MCO or BHO, explain why a particular service is medically necessary for a particular enrollee, and receive approval to deliver the service.

- MCOs are required by their contracts with TennCare to maintain provider networks that are sufficient in numbers and qualifications to deliver covered services to TennCare enrollees. “Covered services” are all those services listed in Attachment B.

**15. What is an “in-plan provider?”**

The term “in-plan” provider or “network” provider means a provider who has entered into a provider agreement with the MCO. The MCO is not obligated to pay an “out-of-plan” provider for any services he or she provides *other than emergency services*. It is important to recognize that not all providers are signed up with all MCO’s. Thus, a provider who is an “in-plan” provider for one MCO may be an “out-of-plan” provider for another MCO. *You must know the name of the child’s MCO in order to find out if a particular provider is “in-plan” or “out-of-plan” for that particular MCO.*

Using in-plan providers is an extra protection for the enrollee, since these providers have signed provider agreements with the MCO which contain a number of specific provisions required by TennCare. In addition, in-plan providers have gone through a process with the MCO called “credentialing”, which means that their background and experience have been checked and meet certain standards.

**16. What if you want a child to be seen by an “out-of-plan” provider?**

If the situation is not an emergency, the first step should be to discuss the matter with the child’s primary care provider (PCP) in the MCO. The PCP can treat the child or refer him or her to an in-plan provider who can deliver the services needed. If the PCP is convinced that a particular out-of-plan provider is necessary for the child, then he or she can handle the referral through the MCO. All MCO’s are required in their contract with TennCare to have provisions for using and paying for medically necessary services provided to an enrollee by an out-of-plan provider at the request of an in-plan provider.

Out-of-plan providers should be encouraged to request enrollment in the MCO to which the child belongs so that they can become in-plan providers for that particular child.

### *Emergencies*

Except in emergencies, TennCare MCOs usually require that the services they cover be delivered by “in-plan” providers. **Emergencies are a very important exception.** In the event of an emergency, you should take the child to the nearest hospital or appropriate provider. That hospital or provider does not have to be an “in-plan” provider with the child’s MCO in order to be reimbursed by the MCO for emergency services delivered to the child. TennCare defines emergency medical services as “a sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity that the absence of immediate medical attention could reasonably result in:

- permanently placing an enrollee’s health in jeopardy;
- causing other serious medical consequences;
- causing impairments to body functions; or
- causing serious or permanent dysfunction of an body organ or part

### *17. What are "enhanced" services?*

Enhanced services include those behavioral health services which are provided by DCS to children who are in DCS physical custody and by the BHOs to children who are in DCS legal custody and children who are not in custody. DCS contracts for these services from an array of providers in various settings. They are coordinated by the DCS case manager. Services include: mental health case management, 24 hour residential care, specialized outpatient and symptom management, and psychiatric rehabilitation and support services. For information about authorization for these services, the DCS case manager should be contacted. For Providers who are rendering such services and have contractual or reimbursement questions, they may contact the case manager.

- Sally, a child who is currently in DCS legal and physical custody was receiving inpatient acute psychiatric services. These services were provided by the BHO. When Sally no longer needed the acute inpatient services, her discharge plan identified level 2 treatment needs and recommended stepdown to a structured setting which could provide her with an array of “Level 2” type services. These services were provided by DCS.

### *18. Who can enroll in TennCare?*

TennCare is a health insurance program for people who are eligible for Medicaid or who are Uninsurable. There are certain groups of Uninsured people (people losing Medicaid coverage who do not have access to other insurance, children under age 19, and dislocated workers) who can also enroll in TennCare.

- **To apply for SSI:** Contact the Social Security Administration.

- **To apply for Medicaid:** Contact the county office of the Department of Human Services.
- **To apply for TennCare as an Uninsurable:** Fill out the TennCare application form, get a letter from an insurance company turning the individual down because of a health reason, and send these two items to the TennCare Bureau, P. O. Box 740, Nashville, TN 37202-0740.
- **To apply for TennCare as an Uninsured:** Children under age 19 who do not have access to health insurance can apply for TennCare as Uninsured through their local health departments. Individuals who are losing Medicaid eligibility and who do not have access to other health insurance can apply directly to TennCare as Uninsured, as long as they apply within 30 days of losing their Medicaid eligibility. The TennCare application form should be filled out and sent to the TennCare Bureau, P. O. Box 740, Nashville, TN 37202-0740.

• **NOTE:** When helping a client fill out a TennCare application, make sure that the application is filled out completely. Applications which arrive at TennCare with missing or incomplete information may be denied.

**19. Is there someone who can help when a TennCare enrollee is having trouble accessing TennCare services?**

Yes. There is a Consumer Advocacy Line which has been set up by TennCare for the express purpose of assisting individuals with multiple health problems and others who are having difficulty navigating the TennCare system. The number for the Consumer Advocacy Line is 1-800-722-7474 (313-9240 in the Nashville area). They will assign a caseworker to help the individual having difficulty or his representatives.

• TennCare's contracts with the MCOs contain a clause requiring that they not discriminate against individuals on the grounds of handicap, age, race, color, religion, sex, or national origin. Contractors are required to comply with all applicable federal and state laws and regulations regarding due process and equal protection of the laws.

**20. How can you complain about TennCare or file an appeal?**

If there is a concern regarding the availability or coverage of a service, or a referral, the MCO or BHO should be contacted. **If the situation cannot be resolved at that level, the client may file a complaint or an appeal.** A provider may file a complaint or an appeal on behalf of a patient. **For a child in custody, a DCS case manager, foster parent or adult caregiver may file a complaint or an appeal.** MCOs and BHOs have contact persons available to assist enrollees with complaints and appeals. You can call them directly or call the Tennessee Department of Health Appeals Unit at 1-800-560-5767 (532-6700 in the Nashville area).

*A **complaint** refers to the enrollee's right to protest any action taken (or not taken, depending on the circumstances) by an MCO, BHO, or service provider other than the denial, reduction, termination, suspension, or delay of a medically necessary covered service. Complaints are made in writing to the MCO or BHO, and written decisions must be rendered by the MCO or BHO within 30 days of receipt.*

*An **appeal** refers to the enrollee's right to protest any action taken by the MCO or BHO which results in a denial, termination, suspension, reduction, or delay of a medically necessary covered service. MCOs and BHOs are required to issue a plain language written notice to the enrollee of any action they are taking to deny, terminate, suspend, reduce, or delay medical assistance. Notices of actions to terminate, suspend, or reduce ongoing services must be sent to the enrollee before the action occurs, except in certain circumstances when the MCO or BHO is required to send the notice to the enrollee no later than the date of action.*

- a. **An appeal of the adverse action** may be submitted to the MCO or BHO. The appeal must be made in writing within 30 days of the enrollee's receipt of the written notice. Reasonable accommodations will be made for persons with disabilities who require assistance with their appeal. These accommodations could include such things as an appeal in person, by telephone, or by TTY services or other communication device for people with disabilities. The appeal must be resolved in writing within 90 days from the date the appeal is received. *All of the following events must occur within this 90 day period:*
  - The MCO or BHO reviews the appeal and makes a decision;
  - If the issue is not resolved at the MCO/BHO level, TennCare reviews the appeal and makes a decision;
  - If the issue is not resolved by TennCare, a hearing for the enrollee before an impartial hearing officer or administrative judge is arranged;
  - The impartial hearing officer or administrative judge renders a written decision.
- b. **An expedited appeal** may be requested if the action proposed by the MCO or BHO will result in denying the enrollee urgent care. The enrollee or representative AND his primary care provider or treating specialist physician must attest that the enrollee requires urgent care in order for his appeal to be expedited. Expedited appeals must be resolved within 31 days from the date the appeal is received. *All of the following events must occur within the 31 day period:*
  - The MCO or BHO reviews the appeal and makes a decision;
  - If the issue is not resolved at the MCO/BHO level, TennCare reviews the appeal and makes a decision;
  - If the issue is not resolved by TennCare, a hearing for the enrollee before an impartial hearing officer or administrative judge is arranged;
  - The impartial hearing officer or administrative judge renders a written decision.
- c. If the action proposed by the MCO or BHO will result in terminating, reducing, or suspending ongoing services, the enrollee or representative may appeal and request continuation of services during the appeal process. The request for continuation of services must be made within 10 days of the enrollee's receipt of notice from the MCO or BHO and before the service actually ends.

- d. An appeal form is found at Attachment G.

Addresses for the TennCare Appeals Unit are:

MCO Services: TennCare Appeals Unit  
P.O. Box 000593  
Nashville, TN 37202-0593

BHO Services: TennCare Appeals Unit  
P.O. Box 60159  
Nashville, TN 37202-0159

*Note: Appeals regarding services provided by DCS: Notice regarding how to appeal services provided by DCS will be provided to the representative for the child in state custody at the time of the permanency planning meeting.*

**21. How do I know if a particular individual is already on TennCare?**

You can call the **TennCare Information Line** at 1-800-669-1851 (741-4800 in the Nashville area). They need to know the person's correct name, his or her Social Security Number, and his or her date of birth in order for the TennCare Information Line staff to be able to positively identify the individual.

**22. Where can I go to get TennCare applications and information about TennCare?**

TennCare applications are available at local health departments. You can also get them by calling the **TennCare Information Line** at 1-800-669-1851 (741-4800 in the Nashville area). People with **hearing impairments** can call the TTY line at 1-800-772-7647 (313-9240 in the Nashville area). There is also a **Spanish-speaking information line** at 1-800-254-7568 (227-7568 in the Nashville area). (See Attachment E for a list of useful numbers).

**A good source of general information about TennCare is the TennCare website, which is located at [www.state.tn.us/health/tenncare](http://www.state.tn.us/health/tenncare). This website contains a wealth of information about TennCare policies and is updated on a regular basis.**

**23. How is the MCO/BHO assigned or changed?**

When people initially enroll in TennCare, they choose an MCO from among those which serve the area in which they live. (If they do not choose an MCO, they are assigned to one.) They are enrolled in the BHO which is partnered with the MCO they have chosen (see above). Enrollees have a period of 45 days after enrollment when they can change MCOs if they wish, and thereafter they can change only once a year during the annual fall "Change Period."

At the time of the fall "Change Period," every TennCare enrollee is sent a ballot with the names of the MCOs available where he or she lives. If the enrollee wishes to change MCOs, he must

return this ballot to TennCare with his new choice marked. The ballot must be returned within the timeframe indicated.

There are some circumstances in which people might change MCOs at a time other than the annual "Change Period." People who are enrolled in one of the MCOs which is not a statewide MCO will need to change MCOs if they move to a geographic area that is not served by their MCO.

- Marcus Jones lives in Shelby County and has chosen TLC as his MCO. Mr. Jones's BHO will be TBH, since that is the BHO which is partnered with TLC.
- Marcus Jones is planning to move from Memphis to Clarksville. Since Mr. Jones's current MCO, which is TLC, only serves residents of West Tennessee, he must choose a new MCO from among those that serve Clarksville: Access, MedPlus, BlueCare, and Phoenix. If he wants to remain with TBH as his BHO, he should select Access, MedPlus or BlueCare as his MCO. If he chooses Phoenix as his MCO, his BHO will change to Premier.

***24. How can I find out which MCO or BHO my patients are enrolled in?***

TennCare enrollees have member identification cards from both their MCOs and BHOs. These cards provide the name of the MCO/BHO, information about how to reach them, information about what to do in an emergency, etc. You can also find out MCO/BHO affiliations by calling the TennCare Information Line. Please refer to the response to Question 22 for instructions on how to do this.

***25. How do I get a replacement MCO or BHO identification card?***

Replacement cards can be obtained by calling the MCO/BHO.

***26. If the child is in foster care, who will receive the card, enrollee handbook, or other items from the MCO/BHO?***

The case manager will receive any mailings from the MCO/BHO and should coordinate with the foster family.

***27. How can I find out how to use TennCare Transportation?***

The MCO/BHO member handbooks provide information on how to access transportation services.

- If you do not have a member handbook for the MCO/BHO in which your child is enrolled, you should request the handbook from the MCO/BHO.

**DCS Regional Directors**  
**Attachment A**

REGIONAL OFFICES/REGIONAL ADMINISTRATORS  
(As of 10/12/98)

MIKE HARKLEROAD, RA  
DCS KNOX CO. REG. OFF.  
Suite 210  
2700 Middlebrook Pike  
Knoxville, TN 37921  
Phone: 423-594-6110  
Fax: 423-594-6355

BETSY BROWN, RA  
DCS SOUTHEAST REG. OFF.  
1501 Riverside Dr., Suite 105  
Chattanooga, TN 37406  
Phone: 423-634-6030  
Fax: 423-634-6046

JUDY COLE, RA  
DCS NORTHEAST REG. OFF.  
1411 Clay Street  
Kingsport, TN 37660  
Phone: 423-246-7225  
Fax: 423-245-0552

JAY GAFFNEY, RA  
DCS SOUTHWEST REG. OFF.  
360 N. Cumberland Street  
Jackson, TN 38301  
Phone: 901-423-5812  
Fax: 901-427-4870

KITTY OLIVER, RA  
DCS NORTHWEST REG. OFF.  
1263 Hwy 45 Bypass N.  
Trenton, TN 38382  
Phone: 901-855-7809  
Fax: 901-855-7812

BETH KASCH, ACTING RA  
DCS MID-CUMBERLAND REG. OFF.  
1011 S. Perimeter Park Dr., Suite 235  
Kingsville, TN 37243  
Phone: 615-333-5409 or 5462  
Fax: 615-532-2774

JACKIE JOLLEY, RA  
DCS HAMILTON CO. REG. OFF.  
540 McCallie Avenue  
Suite 300  
Chattanooga, TN 37402  
Phone: 423-634-6412  
Fax: 423-634-6331

JERRY WILSON, RA  
DCS EAST TN REG. OFF.  
419 S. Charles G. Seivers Blvd.  
Clinton, TN 37716  
Phone: 423-457-5960  
Fax: 423-463-8121

SUSAN STEPPE, RA  
DCS DAVIDSON COUNTY REG. OFF.  
500 2<sup>nd</sup> Avenue North  
Kingsville, TN 37243  
Phone: 615-532-4422  
Fax: 615-741-9489

BEN SPARKMAN, RA  
DCS UPPER CUMBERLAND REG. OFF.  
440 Neal Street, East  
Cookeville, TN 38501  
Phone: 931-526-2598  
N/W: 615-741-0294  
Fax: 931-526-1665

ED FRIENDS, RA  
DCS SHELBY CO. REG. OFF.  
170 North Main Street, 4<sup>th</sup> Floor  
Memphis, TN 38103  
Phone: 901-543-7113  
Fax: 901-543-7110

RON NEAL, RA  
DCS SOUTH CENTRAL REG. OFF.  
211 Wayne Street  
Columbia, TN 38401  
Phone: 931-380-2587  
Fax: 931-380-2585

**TennCare Covered Services**  
**Attachment B**

## MCO and BHO Covered Services

Service	Covered by MCO	Covered by BHO	Comments
Inpatient hospital days	X		As medically necessary. Preadmission approval and concurrent reviews allowed.
Psychiatric inpatient facility services		X	As medically necessary for enrollees under 21 and over 65. For enrollees 21-65 who are not Severely and/or Persistently Mentally Ill (SPMI), limited to 30 days per occasion and 60 days per year.
24-hour psychiatric residential treatment		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Psychiatric housing/residential care		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Outpatient hospital days	X		As medically necessary.
Physician inpatient services	X		As medically necessary. This shall include acupuncture performed by a physician or a registered nurse as an anesthetic in connection with a surgical procedure.
Physician psychiatric inpatient services		X	As medically necessary.
Physician outpatient services	X		As medically necessary. This shall include acupuncture performed by a physician or a registered nurse as an anesthetic in connection with a surgical procedure.

Service	Covered by MCO	Covered by BHC	Comments
Outpatient mental health services		X	As medically necessary.
Specialized psychiatric outpatient and symptom management services		X	As medically necessary for children under 21 and for adults 21 and older with SPMI.
Inpatient and outpatient substance abuse treatment services		X	As medically necessary for children under 21 and for enrollees 21 and older who are SPMI. For non-SPMI adults 21 and older, limited to 10 days detox; inpatient and outpatient substance abuse benefits for these enrollees have a maximum lifetime limitation of \$30,000.
Specialized psychiatric crisis services		X	As medically necessary.
Lab & X-ray services	X		As medically necessary.
Newborn services	X		As medically necessary including circumcisions performed by a physician.
Hospice care (must be provided by an organization certified pursuant to Medicare Hospice regulations)	X		As medically necessary.

Service	Covered by MCO	Covered by BHO	Comments
Dental services	X		Preventive, diagnostic, and treatment services for enrollees under age 21. Services for enrollees age 21 and older limited to cases of accidental injury to or neoplasms of the oral cavity, life threatening infection, accidental injury to natural teeth including their replacement (limited to the cost of bridgework of the replacement of teeth injured in an accident unless teeth implants are medically necessary) and the removal of impacted wisdom teeth. (The adult dental "accident" must be caused by some external force, like a car accident, not by some normal act of mastication, or grinding of teeth while sleeping, or any other naturally occurring circumstance.) Orthodontics limited to individuals under age 21 except when an orthodontic treatment plan is approved prior to the enrollee's attaining 20 ½ years of age, and treatment is initiated prior to the recipient attaining 21 years of age, or when orthodontic treatment is the result of facial hemifacial microsomia or congenital birth defects (if enrollee was covered by TennCare at birth).
Vision services	X		Preventive, diagnostic and treatment services (including eyeglasses) for enrollees under age 21. The first pair of cataract glasses or contact lens/lenses following cataract surgery is covered for adults.
Home health care	X		As medically necessary.
Pharmacy	X		As medically necessary. Non-covered therapeutic classes as described in TennCare contract. DESI, LTE, IRS drugs excluded.

Service	Covered by MCO	Covered by BHO	Comments
Psychiatric pharmacy services and pharmacy-related lab services		X	As of July 1, 1998, psychiatric pharmacy services are being provided directly by the State.
Durable medical equipment	X		As medically necessary.
Medical supplies	X		As medically necessary.
Emergency ambulance transportation	X	X	As medically necessary.
Non-emergency ambulance transportation	X	X	As medically necessary.
Non-emergency transportation	X	X	<p>As necessary for enrollees lacking accessible transportation for covered services.</p> <p>The travel to access primary care and dental services must meet the requirements of the waiver terms and conditions. The availability of specialty services, as related to travel distance, should meet the usual and customary standards for the community. However, in the event the MCO is unable to negotiate such an arrangement for an enrollee, transportation must be provided regardless of whether or not the enrollee has access to transportation. If the enrollee is a child, transportation must be provided for the child and an accompanying adult.</p>
Transportation to covered mental health and substance abuse services		X	<p>As medically necessary for enrollees lacking accessible transportation.</p> <p>The availability of specialty services, as related to travel distance, should meet the usual and customary standards for the community. However, in the event the BHO has no contracted provider for specialty services that meets the travel distance or other access</p>

Service	Covered by MCO	Covered by BHO	Comments
			requirements, transportation must be provided to an enrollee regardless of whether or not the enrollee has access to transportation. If the enrollee is a child and needs to be accompanied by an adult, transportation must be provided for both the child and the accompanying adult.
Community health services	X		As medically necessary.
Renal dialysis services	X		As medically necessary.
EPSDT services for enrollees under age 21 in accordance with federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.	X		Screening, diagnostic, and follow-up treatment services as medically necessary in accordance with federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989 for enrollees under 21. Screens shall be in accordance with the periodicity schedule set forth in the latest "American Academy of Pediatrics Recommendations for Preventive Pediatric Care" and all components of the screens must be consistent with the latest "American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care."

Service	Covered by MCO	Covered by BHO	Comments
Mental health case management		X	As medically necessary for children under 21. Must be offered to all persons with an assessment of CRG 1, CRG 2, or TPG 2. As clinically indicated for CRG 3.
Rehabilitation services	X		As medically necessary when determined cost effective by the MCO. All medically necessary services shall be provided to enrollees under 21 years of age in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.
Psychiatric rehabilitation services		X	As medically necessary for children under 21 and for adults 21 and older with SPML.
Chiropractic services	X		When determined cost effective by the MCO.
Private duty nursing	X		As medically necessary and when prescribed by an attending physician for treatment and services rendered by a registered nurse (R.N.) or a licensed practical nurse (L.P.N.), who is not an immediate relative.
Speech therapy	X		As medically necessary, by a Licensed Speech Therapist to restore speech (as long as there is continued medical progress) after a loss or impairment. The loss or impairment must not be caused by a mental, psychoneurotic, or personality disorder. All medically necessary services shall be provided to enrollees under 21 years of age in accordance with EPSDT requirements including federal regulations as described in 42 CFR Part 441, Subpart B, and the Omnibus Budget Reconciliation Act of 1989.

Service	Covered by MCO	Covered by BHO	Comments
Sitter services	X		As medically necessary, a sitter who is not a relative may be used where an enrollee is confined to a hospital as a bed patient and certification is made by a network physician that R.N. or L.P.N. care is needed and neither is available.
Convalescent care	X		Upon receipt of proof that a covered person has incurred medically necessary expenses related to convalescent care, the Plan shall pay for up to and including the 100 <sup>th</sup> day of confinement during any calendar year for convalescent facility(ies) room, board, and general nursing care, provided: (1) a physician recommends confinement for convalescence; (2) the enrollee is under the continuous care of a physician during the period of confinement; and (3) the confinement is required for other than custodial care.
Donor organ procurement	X		As medically necessary for a covered organ transplant.

**Scope of Covered Benefits  
Under EPSDT  
Attachment C**

## Scope of Covered Benefits Under EPSDT

*Note 1: All services other than EPSDT screenings must be medically necessary.*

*Note 2: DCS "physical custody" means that DCS provides or arranges for the placement of the individual. Some children may be in DCS legal custody, but not physical custody. These are children who have been placed in DCS custody by the court but who continue to live with parents, relatives, etc. TennCare-eligible children in DCS legal but not physical custody receive the same services from the BHOs that children who are not in custody receive.*

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
1	Acute inpatient hospital services	X		
2	Psychiatric inpatient facility services		X	
3	Outpatient hospital services	X		
4	Outpatient mental health services		X	
5	Physician inpatient services	X		
6	Physician psychiatric inpatient services		X	
7	Physician outpatient services	X		
8	Inpatient and outpatient substance abuse treatment		X (as medically necessary)	X (for children in DCS)

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
	programs		except for enrollees who are children in DCS physical custody; for these children, the BHO is responsible for a maximum of 10 days detox and a maximum lifetime limitation of \$30,000 on inpatient and outpatient substance abuse treatment benefits in excess of the maximum lifetime limitation of \$30,000)	physical custody, detox days in excess of 10 and inpatient and outpatient substance abuse treatment benefits in excess of the maximum lifetime limitation of \$30,000)
9	Lab & x-ray services	X (except for lab services related to psychotropic or substance abuse drugs)	X (lab services related to psychotropic or substance abuse drugs)	
10	Newborn services	X		
11	Hospice care	X		
12	Dental services	X		
13	Vision services	X		
14	Home health care For psychiatric home health care, see categories #4 and #32.	X		
15	Pharmacy	X (except for drugs related to mental health and substance abuse treatment)	X* (for mental health and substance abuse treatment)	
16	Durable medical equipment	X		

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
17	Medical supplies	X		
18	Emergency ambulance transportation	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
19	Non-emergency ambulance transportation	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
20	Non-emergency transportation to covered services	X (except for transportation related to mental health and substance abuse treatment)	X (for mental health and substance abuse treatment)	
21	Community health services <i>For Community Mental Health Center services, see categories #4 and #32.</i>	X		
22	Renal dialysis services	X		
23	EPSDT screenings	X		
24	EPSDT diagnostic and treatment services	X (except for mental health and substance abuse problems)	X (for mental health and substance abuse problems)	
25	Developmental assessments	X (unless the child has a	X (if the child has a	

	Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
		previously diagnosed mental illness)	previously diagnosed mental illness)	
26	Rehabilitation services	X (except for psychiatric rehabilitation services)	X (psychiatric rehabilitation services for children not in DCS physical custody)	X (psychiatric rehabilitation services for children in DCS physical custody)
27	Chiropractic services	X (when determined cost effective by the MCO)		
28	Private duty nursing <i>For psychiatric private duty nursing services, see categories #4 and #32.</i>	X		
29	Speech therapy	X		
30	Case management	X	X (mental health case management for children not in DCS physical custody)	X (targeted case management for children in State custody or at risk of State custody; mental health case management when medically necessary for children in DCS physical custody)
31	24-hour residential treatment		X (for children not in DCS physical custody)	X (for children in DCS physical custody)
32	Specialized outpatient and symptom management		X (for children not in DCS)	X (for children in DCS)

Service	MCO Responsibility	BHO Responsibility	DCS Responsibility
services		physical custody)	physical custody)
33 Specialized crisis services		X (for children not in DCS physical custody)	X (for children in DCS physical custody)
34 Children's therapeutic intervention services			X (for children in DCS physical or legal custody)
35 Services in an intermediate care facility for the mentally retarded (covered by TennCare outside the MCOs and BHOs)			
36 Services in a nursing facility (covered by TennCare outside the MCOs and BHOs)			

\*Effective July 1, 1998, pharmacy services for mental health and substance abuse drugs are managed and paid for by TennCare outside the BHOs.

The "scope of benefits" provided in the E, 3DT Consent Decree (see Section 54) includes the above services. The Consent Decree list is taken from federal statute, which is oriented more toward types of service providers than types of services. The list from the Consent Decree list is provided below, and services are cross-referenced to the services identified in the above chart.

- (a) Inpatient hospital services (other than services in an institution for mental diseases)—see #1.
- (b) Outpatient hospital services; rural health clinic services; and services offered by a federally qualified health center—see #3, #4, #8, #21.
- (c) Other laboratory and X-ray services—see #9.

- (d) EPSDT services, and family planning services and supplies—for EPSDT services, see all services listed in chart; for family planning services and supplies, see #5, #7, #17, #21.
- (e) Physicians' services; medical and surgical services furnished by a dentist—see #5, #6, #7, and #12.
- (f) Medical care, or any other type of remedial care recognized under state law, furnished by licensed practitioners within the scope of their practice as defined by state law—see all services listed in chart.
- (g) Home health care services—see #14.
- (h) Private duty nursing services—see #28.
- (i) Clinic services—see #3, #4, #8, #21, #26, and #32.
- (j) Dental services—see #12.
- (k) Physical therapy and related services—see #5, #7, and #21.
- (l) Prescribed drugs, dentures, and prosthetic devices; eyeglasses—see #13, #15, and #17.
- (m) Other diagnostic, screening, preventive, and rehabilitative services—see #23, #24, #25, #26.
- (n) Services in an intermediate care facility for the mentally retarded (other than in an institution for mental diseases)—see #35.
- (o) Inpatient psychiatric services for individuals under 21—see #2.
- (p) Services furnished by a nurse-midwife—see #5, #7, and #21.
- (q) Hospice care—see #11.
- (r) Case management services and TB-related services—for case management services, see #30; for TB-related services, see #1, #3, #5, #7, #9, #15, #17, and #21.
- (s) Respiratory care services—see #14.
- (t) Services furnished by a certified pediatric nurse practitioner or certified family nurse practitioner—see #5, #7, #10.
- (u) Personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded, or institution for mental disease—see #24.
- (v) Any other medical care, and any type of remedial care recognized under state law, specified by the Secretary of the United States Department of Health and Human Services—see all services on above chart.

**TennCare MCOs and BHOs  
Attachment D**

# MANAGED CARE ORGANIZATIONS

For Medical Services Only

Updated 09-22-98

<u>ADMINISTRATIVE OFFICES</u>		<u>PROVIDER SERVICES</u>	<u>MEMBER SERVICES</u>
VOLUNTEER STATE HEALTH PLAN (BlueCare: Formerly BlueCross BlueShield of TN) 801 Pine Street Chattanooga, Tennessee 37402-2555 ATT: Vicky Gregg, President and CEO (423) 752-6767 FAX: (423) 752-6790 Serving: <i>First Tennessee</i> <i>Southeast</i> <i>Upper Cumberland</i> <i>Mid Cumberland</i> <i>South Central Tennessee</i> <i>Northwest Tennessee</i> <i>Southwest Tennessee</i> <i>Davidson County</i> <i>Hamilton County</i> <i>Shelby County</i> <i>Knox County</i> <i>East Tennessee</i>	First Tennessee  Southeast, Upper Cumberland, and Hamilton County  Mid Cumberland, South Central, and Davidson County  Northwest, Southwest and Shelby County  East Tennessee and Knox County	1-800-468-9736  1-800-468-9786  1-800-818-0962  1-800-468-9772  1-800-468-9751	1-800-468-9698  1-800-468-9775  1-800-205-4983  1-800-468-9770  1-800-468-9771
HERITAGE NATIONAL HEALTH PLAN OF TENNESSEE, INC. (John Deere Health Care/Heritage National Health Plan) Executive Tower I 408 North Cedar Bluff Road, Suite 400 Knoxville, Tennessee 37923 ATT: Joanna Richards, TennCare Supervisor (423) 769-1536 FAX: (423) 690-1941 Serving: <i>First Tennessee</i> <i>Knox County</i> <i>East Tennessee</i> <i>Hamilton County</i> <i>Southeast Tennessee</i>		(423) 690-5572	1-800-778-1993
MEMPHIS MANAGED CARE CORPORATION (TLC Family Care Healthplan) P.O. Box 49 Memphis, TN. 38101 ATT: Karl V. Kovacs, Executive Director (901) 725-7100 FAX: (901) 725-3817; (901) 725-2844 Serving: <i>Shelby County</i> <i>Northwest</i> <i>Southwest</i>	Shelby County  Northwest and Southwest	(901) 725-7100 Ext. 3015  1-800-473-6523	(901) 725-7100  1-800-473-6523
		FOR FED-X PURPOSES: 1407 Union Avenue, Suite 1100 Memphis, Tennessee 38104-3627	

**ADMINISTRATIVE OFFICES****PROVIDER  
SERVICES****MEMBER  
SERVICES****OMNICARE HEALTH PLAN, INC.***(OmniCare Health Plan)*

1991 Corporate Ave., 5th Floor

Memphis, Tennessee 38132

ATT: Osbie L. Howard, Executive Director

(901) 346-0064 FAX: (901) 348-2212

*Serving: Shelby County**Davidson County*

1-300-346-0034

1-800-876-9758

**PHOENIX HEALTH CARE OF TENNESSEE, INC.***(Phoenix Healthcare)*

3401 West End Avenue, Suite 470

Nashville, Tennessee 37203

ATT: Anica Howard, Executive Director

(615) 460-0262 FAX: 460-0288

*Serving: Statewide*

1-800-242-8840

1-800-449-3339

**PREFERRED HEALTH PARTNERSHIP OF TENNESSEE, INC.***[Preferred Health Partnership (PHP)]*

1420 Centerpoint Blvd.

Knoxville, Tennessee 37932

ATT: Ruth Allen, Vice President,

Government Programs

(423) 470-7470 FAX: (423) 470-7404

*Serving: Statewide*

1-800-747-0008

1-800-747-0008

**PRUDENTIAL HEALTH CARE PLAN, INC.***(Prudential Community Care)*

3150 Lenox Park Blvd., Suite 110

Memphis, Tennessee 38115

ATT: Michael Jones, Government Program Coordinator

(901) 541-9362 FAX: (901) 368-0643

*Serving: Shelby County*

1-800-778-5463

1-800-778-5463

**TENNESSEE MANAGED CARE NETWORK***(Access...MedPLUS)*

210 Athens Way

Nashville, Tennessee 37228

ATT: Anthony J. Cebrun, J.D., M.P.H., Chief Executive Officer

(615) 255-2700 FAX: (615) 313-2394

{205 Reidhurst - (615) 329-2016 FAX: (615) 313-2392}

*Serving: Statewide*

1-800-494-8068

1-800-523-3112

**VUMC CARE, INC.***(VHP Community Care)*

706 Church Street, Suite 500

Nashville, Tennessee 37203-3511

ATT: James Geraughty, M.D., Interim President

(615) 782-7821 FAX: (615) 782-7812

*Serving: Davidson County*

(615) 782-7878

(615) 782-7878

# BEHAVIORAL HEALTH ORGANIZATIONS

For Mental Health/Substance Abuse Services Only

Updated 09-22-98

<u>ADMINISTRATIVE OFFICES</u>	<u>PROVIDER SERVICES</u>	<u>MEMBER SERVICES</u>
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Premier Behavioral Systems of Tennessee  
222 Second Avenue North, Suite 220  
Nashville, Tennessee 37201  
ATT: Charles D. Klusener, Chief Manager  
(615) 313-4549 FAX: (615) 743-2131  
*Serving: Statewide*

1-800-325-7864

1-800-325-7864

Tennessee Behavioral Health, Inc.  
209 10th Avenue South, Suite 547  
Nashville, Tennessee 37203  
ATT: Charles D. Klusener, President  
(615) 313-4549 FAX: (615) 743-2131  
*Serving: Statewide*

1-800-447-7242

1-800-447-7242

## MCOs AND BHOs BY REGION

### FIRST TENNESSEE REGION

Carter, Greene, Hancock, Hawkins,  
Johnson, Sullivan, Unicoi, Washington

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9736	1-800-468-9698
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008

### BHO

Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### EAST TENNESSEE REGION

Anderson, Blount, Campbell, Claiborne,  
Cocke, Grainger, Hamblen, Jefferson, Loudon,  
Monroe, Morgan, Roane, Scott, Sevier, Union

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9751	1-800-468-9771
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008

### BHO

Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### **SOUTHEAST REGION**

Bledsoe, Bradley, Franklin, Grundy, Marion,  
McMinn, Meigs, Polk, Rhea, Sequatchie

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9786	1-800-468-9775
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### **UPPER CUMBERLAND REGION**

Cannon, Clay, Cumberland, Dekalb, Fentress,  
Jackson, Macon, Overton, Pickett, Putnam,  
Smith, VanBuren, Warren, White

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9786	1-800-468-9775
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### MID CUMBERLAND REGION

Cheatham, Dickson, Houston, Humphreys,  
Montgomery, Robertson, Rutherford, Stewart,  
Sumner, Trousdale, Williamson, Wilson

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-818-0962	1-800-205-4983
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

### SOUTH CENTRAL TENNESSEE REGION

Bedford, Coffee, Giles, Hickman, Lawrence, Lewis,  
Lincoln, Marshall, Maury, Moore, Perry, Wayne

MCO	Provider Services	Member Services
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-818-0962	1-800-205-4983
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## NORTHWEST TENNESSEE REGION

Benton, Carroll, Crockett, Dyer, Gibson,  
Henry, Lake, Obion, Weakley

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
TLC Family Care Healthplan	1-800-473-6523	1-800-473-6523
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

## SOUTHWEST TENNESSEE REGION

Chester, Decatur, Fayette, Hardeman,  
Hardin, Haywood, Henderson, Lauderdale,  
Madison, McNairy, Tipton

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
TLC Family Care Healthplan	1-800-473-6523	1-800-473-6523
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**DAVIDSON COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-818-0962	1-800-205-4983
OmniCare Health Plan	1-800-346-0034	1-800-876-9758
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
VHP Community Care	(615) 782-7878	(615) 782-7878
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**HAMILTON COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-466-9775	1-800-466-9775
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**KNOX COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9751	1-800-468-9771
John Deere Health Care/Heritage National Health Plan	(423) 690-5572	1-800-778-1993
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**SHELBY COUNTY**

<b>MCO</b>	<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS	1-800-494-8068	1-800-523-3112
BlueCare	1-800-468-9772	1-800-468-9770
OmniCare Health Plan	1-800-346-0034	1-800-876-9758
Phoenix Healthcare	1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)	1-800-747-0008	1-800-747-0008
Prudential Community Care	1-800-778-5463	1-800-778-5463
TLC Family Care Healthplan	(901) 725-7100	(901) 725-7100 EXT. 3015
<b>BHO</b>		
Premier Behavioral Systems of Tennessee	1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.	1-800-447-7242	1-800-447-7242

**OUT - OF - STATE**

<b>MCO</b>		<b>Provider Services</b>	<b>Member Services</b>
Access...MedPLUS		1-800-494-8068	1-800-523-3112
BlueCare	(Physician)	(423) 755-5992	1-800-836-6227
	(Hospital)	(423) 755-2043	
	(Other)	(423) 755-5973	
Phoenix Healthcare		1-800-242-8840	1-800-449-3339
Preferred Health Partnership (PHP)		1-800-747-0008	1-800-747-0008
<b>BHO</b>			
Premier Behavioral Systems of Tennessee		1-800-325-7864	1-800-325-7864
Tennessee Behavioral Health, Inc.		1-800-447-7242	1-800-447-7242

**Useful Telephone Numbers**  
**Attachment E**

## Useful Telephone Numbers

TennCare Information Line

1-800-669-1851 (741-4800 in the Nashville area)

TennCare TYY Information Line for persons with hearing impairments

1-800-772-7647 (313-9240 in the Nashville area)

TennCare Spanish-speaking Information Line

1-800-254-7568 (227-7568 in the Nashville area)

TennCare Consumer Advocacy Line

1-800-722-7474 (313-9972 in the Nashville area)

TennCare Partners Mental Health and Substance Abuse Information Line

1-800-758-1638 (242-7339 in the Nashville area)

TennCare Partners Statewide Mental Health Crisis Line

1-800-809-9957

TennCare Appeals Unit

1-800-878-3192 (532-6713 in the Nashville area)

TennCare Bureau Office

1-615-741-0213

**Federal Definitions of Covered  
Services Under EPSDT  
Attachment F**

# Federal Definitions of Covered Services Under EPSDT

*Note: These are abbreviated definitions. For the full text, please consult 42 USC Section 1396 and related sections.*

1. **Inpatient hospital services (other than services in an institution for mental diseases)**  
The term “inpatient hospital services” means certain items and services furnished to an inpatient of a hospital and generally by the hospital. These items and services include bed and board, nursing and other related services, use of hospital facilities, medical social services, and drugs, biologicals, supplies, appliances, and equipment for use in the hospital. Items and services also include diagnostic or therapeutic items or services *excluding* medical or surgical services provided by a physician, resident, or intern; certified nurse midwife services; qualified psychologist services; services of a registered nurse anesthetist; and services of a private duty nurse or other private duty attendant. Not included in the list of excluded services are certain services provided by professionals working in a teaching hospital and certain services performed by physician assistants, nurse practitioners, and clinical nurse specialists.
2. **Outpatient hospital services; rural health clinic services; and services offered by a federally-qualified health center.**  
The term “outpatient hospital services” is not defined.  
The term “rural health clinic services” means physicians’ services and incidental services and supplies; services furnished by a physician assistant, nurse practitioner or by a clinical social worker and incidental services and supplies; and, where there exists a shortage of home health agencies, part-time or intermittent nursing care and related medical supplies.  
The term “services offered by a federally-qualified health center” means services of the kind mentioned for rural health clinic services, plus preventive primary health services.
3. **Other laboratory and x-ray services.**  
The term “other laboratory and x-ray services” is not defined.
4. **EPSDT services, and family planning services and supplies.**  
The term “EPSDT services” means screening services, vision services, dental services, hearing services, and such other necessary health care, diagnostic services, treatment, and other measures to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services.

The term “family planning services and supplies” is not defined.

5. **Physicians’ services; medical and surgical services furnished by a dentist.**  
The term “physicians’ services” means services provided by a physician, whether furnished in the office, the patient’s home, a hospital, or a nursing facility, or elsewhere.  
The term “medical and surgical services furnished by a dentist” means services performed by a dentist to the extent that such services may be performed under State law either by a doctor of medicine or by a doctor of dental surgery or dental medicine and would be considered “physicians’ services” if furnished by a physician.
6. **Medical care, or any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law.**  
This term is not specifically defined, although there are two limitations: the term does not include (a) care or services for any individual who is an inmate of a public institution (except as a patient in a medical institution) or (b) care or services for any individual who is a patient in an Institution for Mental Diseases and who is over 21 but under 65 years of age.
7. **Home health care services.**  
The term “home health care services” means the following items and services furnished by a home health agency to an individual who is under the care of a physician:
  - (a) Part-time or intermittent nursing care provided by or under the supervision of a registered professional nurse;
  - (b) Physical or occupational therapy or speech-language pathology services;
  - (c) Medical social services under the direction of a physician;
  - (d) To the extent permitted in regulations, part-time or intermittent services provided by a home health aide;
  - (e) Medical supplies and durable medical equipment.
8. **Private duty nursing services.**  
The term “private duty nursing services” is not defined.
9. **Clinic services.**  
The term “clinic services” means services performed at a clinic by or under the direction of a physician. It may include services performed outside the clinic by clinic personnel for eligible individuals who do not reside in a permanent dwelling or do not have a fixed home or mailing address.
10. **Dental services.**  
The term “dental services” is not defined.
11. **Physical therapy and related services.**

The term “outpatient physical therapy services” means physical therapy services furnished by a physical therapist in his office or the individual’s home to a patient who is under the care of a physician. The services must be delivered pursuant to a plan of care established and periodically reviewed by the physician.

12. **Prescribed drugs, dentures, and prosthetic devices; eyeglasses.**

The term “drugs” refers to certain approved drugs.

The terms “dentures,” “prosthetic devices,” and “eyeglasses” are not defined.

13. **Other diagnostic, screening, preventive, and rehabilitative services.**

“Other diagnostic, screening, preventive, and rehabilitative services” include any medical or remedial services provided in a facility, home, or other setting which are recommended by a physician or other licensed practitioner of the healing arts within the scope of his practice under State law for the maximum reduction of physical or mental disability and restoration of an individual to the best possible functional level.

14. **Services in an intermediate care facility for the mentally retarded (other than in an institution for mental diseases).**

The term “intermediate care facility for the mentally retarded” means an institution (or distinct part thereof) for people with mental retardation which provides health or rehabilitative services to these individuals and meets HCFA standards.

15. **Inpatient psychiatric services for individuals under age 21.**

The term “inpatient psychiatric services for individuals under age 21” means inpatient services involving active treatment in an institution (or distinct part thereof) for individuals under the age of 21. The institution must meet HCFA standards.

16. **Services furnished by a nurse-midwife.**

The term “certified nurse midwife services” means services furnished by a ~~certified nurse midwife and incidental services and supplies~~ which the certified nurse midwife is authorized to provide under State law and which would otherwise be covered if furnished by a physician or as an incident to a physician’s service.

17. **Hospice care.**

The term “hospice care” means the following items and services provided to a terminally ill individual by a hospice program under a written plan of care established and periodically reviewed by the individual’s attending physician and by the medical director of the program:

- (a) Nursing care provided by or under the supervision of a registered professional nurse;
- (b) Physical or occupational therapy, or speech-language pathology services;
- (c) Medical social services under the direction of a physician;

- (d) Services of a home health aide;
- (e) Services of a homemaker;
- (f) Physicians' services;
- (g) Short-term inpatient care (including both respite care and procedures necessary for pain control and acute and chronic symptom management);
- (h) Counseling (including dietary counseling).

**18. Case management services and TB-related services.**

The term "case management services" means services which will assist individuals in gaining access to needed medical, social, educational, and other services.

The term "TB-related services" means each of the following services related to treatment of infection with tuberculosis:

- (a) Prescribed drugs;
- (b) Physicians' services;
- (c) Laboratory and x-ray services (including services to confirm the presence of infection);
- (d) Clinic services and Federally-qualified health center services;
- (e) Case management services;
- (f) Services (other than room and board) designed to encourage completion of regimens of prescribed drugs by outpatients, including services to observe directly the intake of prescribed drugs.

**19. Respiratory care services.**

The term "respiratory care services" means services provided on a part-time basis in the home of an individual who is medically dependent on a ventilator for life support at least six hours a day. These services are provided by a respiratory therapist or other health care professional trained in respiratory therapy (as determined by the State).

**20. Services furnished by a certified pediatric nurse practitioner or certified family nurse practitioner.**

The term "services furnished by a certified pediatric nurse practitioner or certified family nurse practitioner" refers to services which these providers are legally authorized to perform under State law.

**21. Personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded, or institution for mental disease.**

The term "personal care services furnished to an individual who is not an inpatient or resident of a hospital, nursing facility, intermediate care facility for the mentally retarded, or institution for mental disease" means services authorized for the individual by a physician in accordance with a plan of treatment, furnished in a home or other location, and provided by qualified individuals who are not members of the individual's family.

22. Any other medical care, and any type of remedial care recognized under State law and specified by HCFA.  
See definition #6.

**TennCare Appeals Form  
Attachment G**

Appeal Form *Child in State Custody*  
**TennCare Health Care Grievance**

Name of Patient: \_\_\_\_\_  
First Name Middle Initial Last Name

Patient's Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Patient's Address \_\_\_\_\_  
P.O. Box, Rural Route or Apartment No. and Street Name

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number(s) where patient can be reached \_\_\_\_\_

Patient's TennCare Plan is: \_\_\_\_\_

After a second look, your TennCare plan will contact the patient and doctor with a decision. Anyone else they should tell?

Name and Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

It is OK for my TennCare plan to see my private medical records.

Patient or Authorized Representative must sign here: X \_\_\_\_\_

.....  
**The Problem**

1. What care or medicine do you need? \_\_\_\_\_  
\_\_\_\_\_

2. Did your doctor say you need this health care or medicine? Yes \_\_\_\_\_ No \_\_\_\_\_  
Doctor's name \_\_\_\_\_ Phone \_\_\_\_\_  
Doctor's address \_\_\_\_\_

**Important:** Does your doctor say that it would be dangerous for you to go without the care or medicine for very long? If this is true, ask the doctor to write to the TennCare plan, explaining the danger and asking for a fast decision. This is called an "expedited review".

3. When did the problem start? (if you know the dates) \_\_\_\_\_

4. Do you want to keep getting the same care or medicine until your grievance is decided?  
Yes \_\_\_\_\_ No \_\_\_\_\_

To get this, you must appeal within **10 days**. Also, you must already be getting the care or medicine. You might be billed for this care if the decision after your grievance is "no" again.

.....  
**Deadlines:** You have **10 days** to file a grievance if you want to keep the same care or medicine during the grievance.

If you wait longer than 10 days, you can still file a grievance within **30 days**. But, your care or medicine will be stopped or cut until after the grievance is decided.

# Your Rights to Health Care under TennCare

Under TennCare, you have a right to the health care and medicine that you need. But, your doctor may have to first get an OK from your TennCare plan.

**Your TennCare Plan must say "yes" or "no" within 21 days.** When your doctor asks your TennCare plan for an OK, the plan must send you a letter saying "yes" or "no" within 21 days.

What if you do not get a letter from your TennCare plan by the 21st day? You can call the state TennCare office at 800-560-5767 or 615-741-0095 (Nashville area). Tell them how long you have waited for an answer. They may OK the care your doctor ordered.

**Your TennCare plan must warn you if it wants to STOP or CUT BACK your health care.** Your plan must tell you in writing before it stops or cuts care you have been getting. They must write you at least 10 days ahead of time.

**Have a problem getting care or medicine? You can file a Grievance with your plan.** You can file a Grievance (complaint) if your TennCare plan does not OK care or medicine your doctor ordered. You can also do this if the plan decides to stop or cut the care you are already getting.

When you file a Grievance, someone else at your TennCare plan takes a look at what you need.

**You have 30 days to file a Grievance, but...** You have 30 days to file a Grievance after the date on your letter from your TennCare plan. But, if you wait more than 10 days, your care will not stay the same during your Grievance.

**If you file a Grievance within 10 days, your care may stay the same during your Grievance.** Your plan's letter may say you can ask for this. If you want this, you must file a Grievance within 10 days and ask to keep the care you have been getting.

**How to file a Grievance.** If you do not have a disability, your Grievance must be in writing. You can use this form or write a letter. You may use more paper

if you need to. Mail the Grievance to your TennCare plan at the address in the box at the bottom of this page. If your Grievance is with your MCO, use their name in the address. If your Grievance is with your BHO, use their name in the address.

If you need help with your Grievance, because of any kind of disability, call the TennCare Hotline at 1-800-669-1851. This is a free call. Tell an operator you need help with your Grievance form. If you can, write on this page the date you called and who you talked to.

**Your TennCare plan will take a second look.** After your TennCare plan gets your Grievance, they will take a second look and send you an answer in writing.

If you do not get a written answer from your TennCare plan within 14 days, call the state TennCare office at 800-560-5767 or 615-741-0095 (Nashville area). Tell them how long you have waited. Ask if they can OK the care your doctor ordered.

If you get a letter from your plan that says again that you do not need the care, the letter must say why.

**The State will also take a look.** If your TennCare plan says "no" again after your Grievance, they must send your Grievance to the state TennCare Bureau. Their medical staff will take a look at your needs. If they agree with you, they will tell your TennCare plan to pay for the care. If the state medical staff does not agree with you, they will hold a fair hearing. This lets you or your lawyer try to prove that you need the care.

Mail MCO Grievances to:

*(insert your MCO's name here)*

P.O. Box 000593

Nashville, TN 37202-0593

Mail BHO Grievances to:

*(insert your BHO's name here)*

P.O. Box 000159

Nashville, TN 37202-0159

**Attachment I**

**Semiannual Review of  
EPSDT Appeals**

# Policy Planning and Assurance Research and Development

## MEMO

**To:** Ms. Susie Baird  
Bureau of TennCare

**From:** Marguerite Lewis  
Office of Policy Planning and Assurance

**Date:** January 13, 1999

**Re:** EPSDT REPORT (July - December, 1998)

*The number of appeals reflected may not include all appeals received during this time period as these numbers are dependent on the date of entry and the date of the data pulls.*

For each MCO/BHO, the table below reflects the number of children enrolled, the total number of enrollees, the total number of children's appeals and the rate of appeals.

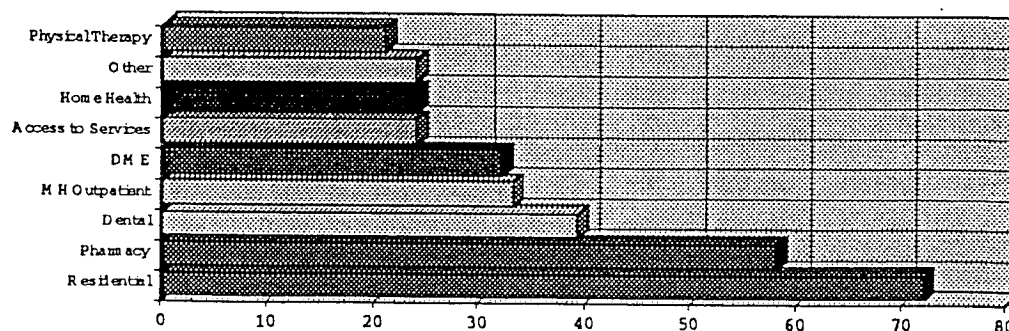
MCO/BHO	# OF CHILDREN ENROLLED*	TOTAL # OF CHILDREN'S APPEALS	APPEALS PER 10,000 CHILDREN
Access...MedPlus	130,811	38	2.9
BC/BS, THP	221,142	104	4.7
Heritage	9,497	4	4.2
Omni-Care	19,726	3	1.5
Phoenix	71,079	32	4.5
PHP	34,716	16	4.6
Prudential	5,882	3	5.1
TLC	26,448	9	3.4
VHP	5,562	5	9.0
<b>TOTAL</b>	<b>524,863</b>	<b>214</b>	<b>4.1</b>
Premier	286,493	82	2.9
IBH	238,370	84	2.7
<b>TOTAL</b>	<b>524,863</b>	<b>146</b>	<b>2.8</b>

\*Source: Bureau of TennCare, as of 12/3/98

Based on a compilation of *Service appeals* data for July - December, 1998, there were a total of 360 appeals filed on behalf of children (20 years of age and under). Two hundred and eighty-two (282) were regular appeals and 78 were expedited appeals. Medical necessity was determined in 312 appeals, no medical necessity was decided on 28, and 20 appeals are still pending a resolution.

### CARE TYPES

Children's appeals included 17 Care Types. The care types with the highest number of appeals are: Residential treatment (72), Pharmacy (58), Dental (39), MH Outpatient (33), Durable Medical Equipment (32), Access to Services (24), Home Health (24), Other (24), and Physical Therapy (21).



Additional Care Types include: MH Inpatient (12), Physician (9), Nutritional (3), Speech Therapy (3), Chiropractic (2), Procedure (2), Vision (1) and Alcohol Treatment-Outpatient (1).

#### TYPE OF SERVICES, MCO/BHO

This table illustrates, by MCO/BHO, the type of service appeals and number for each type.

MCO/BHO NAME	TYPE OF SERVICE
Access Med Plus	Access to Service (8) Dental (13), DME (4), Other (1), Pharmacy (8), Physical Therapy (1), Physician (2), and Vision (1)
Blue Cross/Blue Shield, THP, BlueCare	Access to Services (3), Chiropractic (1), Dental (18), DME (18), Home Health (15), Nutritional (1), Other (19), Pharmacy (13), Physical Therapy (10), Physician (5), and Speech Therapy (1)
Heritage	Access to Services (2), Pharmacy (1), and Speech Therapy (1)
Omni-Care	Dental (1), Home Health (1), and Pharmacy (1)
Phoenix	Access to Services (3), Chiropractic (1), Dental (6), DME (4), Home Health (4), Other (1), Pharmacy (6), Physical Therapy (6), and Procedure (1)
Preferred Health Partnership	Access to Services (1), Dental (1), Home Health (2), Nutritional (2), Other (2), Pharmacy (4), Physical Therapy (1), Physician (2), Procedure (1)
Prudential Community Care	Pharmacy (1) and Physical Therapy (2)
TLC Family Care Health Plan	Access to Services (2), DME (2), Home Health (2), Pharmacy (2), and Physical Therapy (1)
VHP Community Care	DME (4) and Speech Therapy (1)
Premier Behavioral Systems	Alcohol Treatment Outpatient (1), MH Inpatient (8), MH Outpatient (28), Pharmacy (13), Residential (32)
Tennessee Behavioral Health	Access to Services (5), MH Inpatient (4), MH Outpatient (5), Other (1), Pharmacy (9), and Residential (40)

#### APPEALS RESOLUTIONS

MCO/BHO DECISION	TOTAL	DOH DECISION	TOTAL
Affirmed	80	Affirmed	25
		Case Withdrawn by Enrollee	3
		Informal Resolution by Agreement	5
		Reversed	47
Case Withdrawn by Enrollee	2	None Required	2
Informal Resolution by Agreement	53	None Required	53
Reversed	184	None Required	184
No Reconsideration Response	41	Informal Resolution by Agreement	6
		Reversed	15
		Pending DOH Decision	20
TOTAL	360	TOTAL	360

If you have any questions regarding this data, please feel free to call me at 532-6566.

cc: Judy Regan, M.D., Director  
Policy Planning and Assurance

Revised Copy